

# Evaluating your breeding project

## QUESTIONNAIRE

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1 Please provide your contact information below:

Title:

Name:

Institution:

Address:

City:

State/Province:

Zip/Postal Code:

Email:

Phone:

Fax:

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2 What is the species and nomenclature of your strain?

Mouse

Rat

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3 How many animals will you be shipping to us?

Males

Genotypes

Females

Genotypes

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4 What is the current health status of these animals?

SOPF

SPF

Conventional

Unknown

Other:

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5 What is the expected health status for your colony?

SOPF

SPF

Conventional

Unknown

Custom:

*(Inotiv standards)*   *(Inotiv standards)*

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6 How many cages do you currently have for this breeding project?

7 What is the current breeding scheme?

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8 What is the goal of this breeding project?

- A. How many animals per shipment?
- B. Expected sex?      Males      Females      Both
- C. Expected genotype?
- D. Age range at shipment?
- E. Frequency of shipment?
- F. Shipment address:  
*If shipping to another facility other than your own, please include a complete address.*

G. Current location of colony

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9 Do you have any special requirements? Inquire regarding more options. More options possible.

Diet	Aging	Weighing	Conventional	Tissue collection
Treatment	Blood sampling	Observation	Unknown	Others

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