## **BEEF CENTER RESEARCH REQUEST**

Name:		
Department/Bldg/Room:	Email address:	
Office phone:	Cell phone:	
Research Group:	Funded research source or sponsor	:
Is a proposal pending?	Awarded?	
<b>Research Trial or Protocol Name:</b>		
Short name or nickname for this	trial (the way that you will refer to it):	
List personnel involved, including	g graduate or undergraduate students directly	/ involved:
Brief one paragraph statement of	f proposed trial:	
Starting date	Ending date	
Number of animals needed	SIU herd Purchased by PI	Outside herd
Age of animals	Approx. weights Sex_	Breed
Type of space needed (number an	nd size of pens/stalls, etc,; be specific):	
Will the Feed Mill be involved?		
	(source and acquirer)?	
	ational New Animal Drug?	
Special personnel needs:		
Special equipment needs:		
Other instructions or requests:		
Space Assignment:		
Center Manager Signature:	Date:	
Director of Farm Operations signa		
Requestor signature:		
BP# to be billed:		
Assigned Project #		