

NYSPI ANIMAL CARE PERDIEM COST ESTIMATE & ANALYSIS

For All Animal Use Grant Applications

All Investigators using animals in their grants must fill the Per Diem cost form below. After completing the form below, please email it to dcm@nyspi.columbia.edu, or bring it to the office of the office of the Department of Comparative Medicine (DCM) for review and approval, before submitting your grant application.

Principal Investigator Name: _____ Title: _____
 Department: _____ Phone #: _____ Email: _____
 Animal Care Use Protocol #, if available: _____
 Grant Title: _____
 Grant Office, please check one: RFMH Columbia Date: _____

Please check one: New/ Competing Continuation Non-competing Continuation
 Earliest Funding Date: _____ Budget period from: _____ to: _____
 (if new or competing)

		1	2	3	4	5
Years	Species	Maximum number of animals or mouse cages to be housed at any one time	The average number of animals or mouse cages to be used during the planned experiments	The number of days of the year that the planned experiments will last (most commonly 365)	<i>Per Diem Charge</i> <small>Annual increase</small>	<i>Cost Per Year</i>
		Year 1	a.			
	b.					
Year 2	a.					
	b.					
Year 3	a.					
	b.					
Year 4	a.					
	b.					
Year 5	a.					
	b.					
					Total Cost	

Do you request a special housing for ongoing projects? No Yes (please explain)

Do you request an increase in the housing capacity? No Yes (please explain)

Principal Investigator Signature: _____ Date: _____

For Animal Care Facility Use Only:

Reviewed by: _____ Approved by: _____

Date: _____ Date: _____