



## BTC Animal Welfare Concern Report

Thank you for reporting a potential animal humane concern. All reports are treated with utmost confidentiality. Your personal information should you provide it is protected by the Protection and Privacy provisions of *The Freedom of Information and Protection of Privacy Act (FIPPA)* and will remain confidential.

Person Reporting Concern	Animal Owner Information (If Known)
Name:	Name:
Address:	Address:
Phone:	Phone:
Email:	Email:
Animal Information	
Type of Animal(s) and Number of Animals:	
Nature of Complaint	
Concern is: Animal Use Protocol _____ Handling _____ Occupational Health & Safety _____ Other: _____ _____	
General Information: Date: _____ Instructor(s): _____ Student(s): _____ Location: _____	

Please Describe Your Animal Care and Use Concern:

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COMPLETED BY PERSON(S) OR ENTITY INVESTIGATING CONCERN

Name(s): \_\_\_\_\_

1. Was there a negative impact on the animal(s): Yes \_\_\_\_\_ No \_\_\_\_\_

2. Specific Protocol violated if applicable: \_\_\_\_\_

Explain impact and actions taken as noted in nos. 1 & 2 above: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who was contacted to discuss this concern:

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Summarize the issues which were discussed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was there a corrective action agreed upon: Yes \_\_\_\_\_ No \_\_\_\_\_

Describe any corrective actions needed or performed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Committee Notification:

\_\_\_\_\_ Request for immediate review and action

Date: \_\_\_\_\_

\_\_\_\_\_ Report at regular meeting

Date: \_\_\_\_\_

Action(s) taken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Veterinarian's Signature \_\_\_\_\_

Date: \_\_\_\_\_