



FOR US POSTAL SERVICE DELIVERY:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive
RKL 1, Suite 360, MSC 7982
Bethesda, Maryland 20892-7982
Home Page: <http://grants.nih.gov/grants/olaw/olaw.htm>

FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive, Suite 360
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Facsimile: (301) 451-5672

April 25, 2014

Reference: Renewal Assurance #A3216-01

William A. Gern, Ph.D.
Vice President for Research and Economic Development
University of Wyoming
1000 E. University Avenue
Department 3355
Laramie, Wyoming 82071

Dear Dr. Gern:

The Office of Laboratory Animal Welfare (OLAW) reviewed and approved the renewal of your institution's Animal Welfare Assurance (Assurance) that was submitted in compliance with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy), as revised August 2002.


Your Assurance renewal, number **A3216-01**, became effective on **April 25, 2014** and expires on **March 31, 2018**. This Assurance supersedes all previously issued Assurances. Please include the Assurance number in all correspondence to OLAW. A copy of the Assurance signature page is enclosed.

The Assurance is a key document in defining the relationship of your Institution to the PHS. It sets forth the responsibilities and procedures of your Institution regarding the care and use of laboratory animals. Among the important elements of the Assurance, I would especially call your attention to the reporting requirements that are essential for continued compliance with the PHS Policy. Please note that a Report to OLAW is required at least once every 12 months. The reporting period, unless requested otherwise in writing, is the calendar year. Reports, for the previous calendar year, are due **January 31**.

If we may be of further assistance, please do not hesitate to contact me or Dr. Parlett.

Thank you for your attention in these matters.


Sincerely,


Eileen M. Morgan
Director, Division of Assurances
Office of Laboratory Animal Welfare, NIH

Enclosure


cc:
Dr. Robert Scott Seville

VII. Institutional Endorsement and PHS Approval

A. Authorized Institutional Official	
Name: William A. Gern	
Title: Vice President for Research and Economic Development	
Name of Institution: University of Wyoming	
Address: <i>(street, city, state, country, postal code)</i>	
1000 E. University Avenue Department 3355 Laramie, WY 82071	
Phone: (307) 766-5353	Fax: (307) 766-2608
E-mail: willger@uwyo.edu	
Acting officially in an authorized capacity on behalf of this Institution and with an understanding of the Institution's responsibilities under this Assurance, I assure the humane care and use of animals as specified above.	
Signature: 	Date: 4-23-14

B. PHS Approving Official (to be completed by OLAW)

**Eileen M. Morgan-Director, Division of Assurances
Office of Laboratory Animal Welfare
National Institutes of Health
6705 Rockledge Drive
RKL1-Suite 360-MSC 7982
Bethesda,, MD 20892-7982**

Signature:  Date: 4/25/14
Assurance Number: A3216-01
Effective Date: 4/25/14 Expiration Date: 3/31/18