

**1) Sample return for experiments conducted with other licensees**  
**ANIMALS (CONTROL OF EXPERIMENTS) REGULATIONS**

FORM 7

Return of Experiments

Name of Licensee : CHAN, Tai Man  
 No. and date of Licence : (17-X) in DH/HA&P/8/2/X Pt.1  
 Period covered by return : From 1.1.2018 To 31.12.2018

Number of experiments conducted.	Place(s) where performed.	Kinds and number of animals used.	Purpose of experiments (e.g. manual skill, illustrating lectures, etc.).	Any teaching permits, lectures and other endorsements applicable during the period.
3	Room X, X/F, ABC Laboratory Building, The University of ABC, XX Road, Hong Kong	<ul style="list-style-type: none"> <li>● 12 Rabbits (own experiment)</li> <li>● 20 rabbits (same experiment with (17-X) in DH/SHS/8/2/X Pt.1; (17-Y) in DH/SHS/8/2/X Pt.1]</li> </ul>	To study the side effect of Drug A	Nil

Dated 31.12.2018

Signed Chan  
 (Licensee).

.....  
**Annex – This section is not part of Form 7 but information supplied would facilitate our processing of your return.**  
 Contact No.: 2345 6789 Mobile No.: 9876 5432

Email Address: ctm@abc.com

Remarks (check the box(es) and fill in relevant information if applicable):

- I will leave / have left\* my School/ Department/ Company in relation to the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*
- I will stop / have stopped\* the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*
- (Other matters): \_\_\_\_\_

\* please delete as appropriate

**2) Sample return for licensee who intends to leave corresponding School/  
Department/ Company**

**ANIMALS (CONTROL OF EXPERIMENTS) REGULATIONS**

FORM 7

Return of Experiments

Name of Licensee : CHAN, Siu Man

No. and date of Licence : (17-Y) in DH/HA&P/8/2/X Pt.1

Period covered by return : From 1.1.2018 To 31.12.2018

Number of experiments conducted.	Place(s) where performed.	Kinds and number of animals used.	Purpose of experiments (e.g. manual skill, illustrating lectures, etc.).	Any teaching permits, lectures and other endorsements applicable during the period.
2	Room X, X/F, ABC Laboratory Building, The University of ABC, XX Road, Hong Kong	20 rabbits (same experiment with (17-X) in DH/SHS/8/2/X Pt.1; (17-Y) in DH/SHS/8/2/X Pt.1]	To study the side effect of Drug A	Nil

Dated 31.12.2108

Signed Man  
(Licensee).

.....  
**Annex – This section is not part of Form 7 but information supplied would facilitate our processing of your return.**

Contact No.:23456789

Mobile No.:90123456

Email Address:ccm@abc.com

Remarks (check the box(es) and fill in relevant information if applicable):

I will leave / ~~have left~~\* my School/ Department/ Company in relation to the experiments above with effect from 1.1.2019 and intend to cancel my existing licence in this return thereafter\*

I will stop / have stopped\* the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*

(Other matters):

\* please delete as appropriate

**3) Sample return for licensee who has completed or no longer perform experiments**

**ANIMALS (CONTROL OF EXPERIMENTS) REGULATIONS**

FORM 7

Return of Experiments

Name of Licensee : CHAN, Tai Man

No. and date of Licence : (17-Z) in DH/HA&P/8/2/X Pt.1

Period covered by return : From 1.1.2018 To 31.12.2018

Number of experiments conducted.	Place(s) where performed.	Kinds and number of animals used.	Purpose of experiments (e.g. manual skill, illustrating lectures, etc.).	Any teaching permits, lectures and other endorsements applicable during the period.
4	Room X, X/F, ABC Laboratory Building, The University of ABC, XX Road, Hong Kong	20 mice	To study the side effect of Drug B	Nil

Dated 31.12.2018

Signed Chan  
(Licensee).

.....  
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Mobile No.: 9876 5432

Email Address: ctm@abc.com

Remarks (check the box(es) and fill in relevant information if applicable):

I will leave / have left\* my School/ Department/ Company in relation to the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*

I ~~will stop~~ / have stopped\* the experiments above with effect from **1.11.2018** and intend to cancel my existing licence in this return thereafter\*

(Other matters): \_\_\_\_\_

\* please delete as appropriate

#### 4) Sample return for an endorsement to perform experiments for attaining manual skill

### ANIMALS (CONTROL OF EXPERIMENTS) REGULATIONS

#### FORM 7

#### Return of Experiments

Name of Licensee : CHAN, Tai Man

No. and date of Licence : (17-A) in DH/HA&P/8/2/X Pt.1

Period covered by return : From 1.1.2018 To 31.12.2018

Number of experiments conducted.	Place(s) where performed.	Kinds and number of animals used.	Purpose of experiments (e.g. manual skill, illustrating lectures, etc.).	Any teaching permits, lectures and other endorsements applicable during the period.
3	Room X, X/F, ABC Laboratory Building, The University of ABC, XX Road, Hong Kong	2 Pigs	To practise open heart surgical techniques using pigs.	An endorsement to attain manual skill was granted.

Dated 31.12.2018

Signed Chan  
(Licensee).

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Remarks (check the box(es) and fill in relevant information if applicable):

I will leave / have left\* my School/ Department/ Company in relation to the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*

I will stop / have stopped\* the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*

(Other matters):

\* please delete as appropriate

## 5) Sample return for a teaching permit

### ANIMALS (CONTROL OF EXPERIMENTS) REGULATIONS

#### FORM 7

#### Return of Experiments

Name of Licensee : CHAN, Tai Man

No. and date of Licence : (17-B) in DH/HA&P/8/2/X Pt.1

Period covered by return : From 1.1.2018 To 31.12.2018

Number of experiments conducted.	Place(s) where performed.	Kinds and number of animals used.	Purpose of experiments (e.g. manual skill, illustrating lectures, etc.).	Any teaching permits, lectures and other endorsements applicable during the period.
2	Room X, X/F, ABC Laboratory Building, The University of ABC, XX Road, Hong Kong	2 pigs	To demonstrate the physiology of respiratory system .	<b>A teaching permit was granted.</b>

Dated 31.12.2018

Signed Chan  
(Licensee).

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Remarks (check the box(es) and fill in relevant information if applicable):

I will leave / have left\* my School/ Department/ Company in relation to the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*

I will stop / have stopped\* the experiments above with effect from \_\_\_\_\_ and intend to cancel my existing licence in this return thereafter\*

(Other matters): \_\_\_\_\_

\_\_\_\_\_  
\* please delete as appropriate