



DEPARTMENT OF HEALTH & HUMAN SERVICES

PUBLIC HEALTH SERVICE  
NATIONAL INSTITUTES OF HEALTH

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) 402-7065

Date: April 16, 2013

Reference: Animal Welfare Assurance  
**Approval Letter for #A4461-01**

Dr. Lenore M. Koczon  
Vice President of Academic Affairs  
Institutional Official  
Minot State University  
500 University Avenue West  
Minot, North Dakota 58707

Dear Dr. Koczon:

I am pleased to inform you that 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 **A4461-01**, became effective on **April 16, 2013** and expires on **February 28, 2017**. 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 is the calendar year. Reports, for the previous calendar year, are due **January 31**.

Sincerely,

Venita B. Thornton, DVM, MPH  
Senior Assurance Officer  
Office of Laboratory Animal Welfare

cc:  
IACUC Contact

**VII. Institutional Endorsement and PHS Approval**

**A. Authorized Institutional Official**

Name: Dr. Lenore M. Koczon

Title: Vice President of Academic Affairs

Name of Institution: Minot State University

Address: 500 University Ave. W, Minot, ND 58707

Phone: 701-858-3310

Fax:

E-mail: lenore.koczon@minotstateu.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:

*Lenore M. Koczon*

Date:

*28 March, 2013*

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

Dr. Venita B. Thornton, D.V.M., M.P.H.  
Office of Laboratory Animal Welfare (OLAW)  
National Institute of Health  
6705 Rockledge Drive  
RKL1, Suite 360- MSC 7982  
Bethesda, MD 20892-7982  
Phone: (301) 469-7163 Fax: ~~(301) 915-9473~~ 301) 480-3421 <sup>7)</sup>

Signature:

*Venita B Thornton*

Date:

*April 16, 2013*

Assurance Number:

*A4461-01*

Effective Date:

*April 16, 2013*

Expiration Date:

*February 28, 2017*