*PI Food and/or Water Restriction

PI ______________ Protocol # ________

Cage Card #: ____________

Date Duties Begin ________________

Date Duties End ________________

Food Restriction? □

Water Restriction? □

□ Time limited  or □ Quantity limited

□ Check here if OK to feed/water *ad libitum* on weekends or holidays

*A PI Duties Check Sheet must also be completed and maintained in the housing room!*