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| **1. SevLTER Project Title:** |
| **2. Principal Investigator (*last-first-middle initial*):** |
| **3. Mailing Address (*street/PO box, city, state, zip*):** | **Telephone:**  |
| **Fax:**  |
| **Email:**  |
| **4. University/Department or Agency/Sponsor:** | **For graduate students, Major Professor Name & Phone:** |
| **5. Sub-Permittee/Assistant Names:** |
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| **6. Funding Source(s) & Amount(s):** |
| **7. Describe project by specifically identifying timing, frequency, and how the project is expected to proceed:** |
| **8. Project Location**ADD SITE MAP HERE | ADD LOCATION DESCRIPTION AND GPS HERE |
| **9. Identify species or habitats being studied:** |
| **10. Purpose/Hypothesis:** |
| **11. Expected benefits of research/monitoring:** |
| **12. Briefly describe project history and context of research/monitoring project:** |
| **13. Briefly describe project’s relationship to other research/monitoring projects either known of or conducted by the applicant:** |
| **14. Identify the types of specimen collections to be taken or data to be collected during the proposed project:** |
| **15. List other cooperators and institutions involved in the project:** |
| **16. Generally identify the anticipated timeline for analysis, write-up and publication:** |
| **17. Specifically describe all major instrumentation/equipment/gear (i.e. use of drones) and materials used, if applicable or required:** |
| **18: Provide details and schedule for the installation of instrumentation:** |
| **19. Provide details and schedule for the removal of instrumentation:** |
| **20. If instrumentation is permanent, describe need:** |
| **21. If instrumentation requires a maintenance schedule, describe needs and schedule:** |
| **22. Provide a data collection schedule:** |
| **23. Provide logistical arrangements for onsite transportation, and offsite transportation of samples:** |

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| **24. List and attach copies of any licenses you have for equipment operation (i.e., aviation or commercial boats), pesticide applications, transporters) or others if required:** |
| **License Type** | **Number** | **Expiration Date (if applicable)** |
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| **25. List and attach copies of any insurance you have (i.e general liability, flight/grounding, contaminants, medical evacuation, or others if required:** |
| **Insurance Type** | **Carrier** | **Expiration Date (if applicable)** |
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| **26. List and attach copies of any certifications you have, such as rat free, hull inspections, CPR/First Aid, or others if required:** |
| **Certificate type** | **Expiration Date (if applicable)** |
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| **27. List and attach copies of any other Federal, State, or Tribal permits if required:** |
| **Permit Type** | **Permit Number** | **Expiration Date (if applicable)** |
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| **28. Provide descriptions, license plate and/or identification numbers of vehicles used for onsite transportation, if required:** |
| **Vehicle Type Vehicle** | **Plate/I.D./Registration #** |
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**29. Additional documents:**

[ ] Proposal

[ ] CV

[ ] Assurance of Animal Care Form or an approval from an Institutional Animal Care and Use
Committee

[ ] Safety plan

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| **Interim Report** |
| **Project Progress Report *(include preliminary results, attach maps, etc. as appropriate, note problems/challenges)*** |