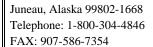
07/16/2004 OMB Control No.: 0648–0512 Expiration Date: 02/09/2008



Subsistence Halibut Special Permits Application

U.S. Dept of Commerce/NOAA National Marine Fisheries Service Restricted Access Management P.O. Box 21668





Block A - Type of Subsistence Halibut Special Permit Requested		
Please indicate the type of permit for which you are applying (please mark only one):		
[] Community Harvest Permit [] Ceremonial Permit	[] Educational Permit	
] New [] Renewal	
If a Renewal, enter permit number		
Block B - Subsistence Halibut Community Harvest Permit		
1. Name of Alaska Native tribe or community		
2. Community Halibut Permit Coordinator		
Name (First, Middle, Last)		
Mailing Address (Number, Street, City, State, Zip Code) Day	time Telephone Number	
Block C - Subsistence Halibut Ceremonial Permit		
1. Name of Alaska Native tribe or community		
2. Ceremonial Halibut Permit Coordinator		
Name (First, Middle, Last)		
Mailing Address (Number, Street, City, State, Zip Code) Day	rtime Telephone Number	
3. Describe occasion of cultural or ceremonial significance		

07/16/2004 OMB Control No.: 0648–0512 Expiration Date: 02/09/2008

Block D - Subsistence Halibut Education Permit	
Name of Alaska Native Tribe	
2. Educational Halibut Permit Instructor	
Name (First, Middle, Last)	Daytime Telephone Number
Mailing Address (Number, Street, City, State, Zip Code)	
3. Educational Institution or Organization	
Mailing Address (Number, Street, City, State, Zip Code)	Daytime Telephone Number
4. Course Description (add extra sheet if necessary)	
5. Demonstrate enrollment of qualified students	
6. Describe minimum attendance requirements	
7. Describe standards for the successful completion of the educational program	
8. Describe standards for successful completion of the course	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salveson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the Alaska Subsistence Halibut Program; 3) Federal law and regulations require and authorize NMFS to manage subsistence halibut programs in Alaska; 4) Submission of this information is mandatory for any tribe participating in subsistence fishing for Pacific halibut under the Ceremonial or Educational Permit Programs; 5) This information is used to monitor the subsistence halibut program under the Northern Pacific Halibut Act of 1982; 6) Responses to this information request are not confidential.

07/16/2004 OMB Control No.: 0648–0512 Expiration Date: 02/29/2008



INSTRUCTIONS Subsistence Halibut Special Permits Application

The Halibut Subsistence Fishery is authorized by Federal regulations at 50 CFR Part 300 and provides for eligible persons to conduct subsistence halibut fishing in Convention waters off Alaska.

Subsistence halibut means halibut caught by a rural resident or a member of an Alaska Native tribe for direct personal or family consumption as food, sharing for personal or family consumption as food, or for customary trade.

Alaska Native Tribe means, for purposes of the subsistence fishery for Pacific halibut in waters in and off Alaska, a federally recognized Alaska Native tribe that has customary and traditional use of halibut.

Block A - Type of Subsistence Halibut Special Permit Requested

Please indicate the type of permit for which you are applying (please mark only one): Community Harvest Permit,

Ceremonial Permit, or

Educational Permit.

Indicate whether you are applying for a new permit or a renewal of an existing permit.

If a Renewal, enter permit number

Block B - Subsistence Halibut Community Harvest Permit

- 1. Name of Alaska Native tribe or community
- 2. Community Halibut Permit Coordinator

Name (First, Middle, Last)

Mailing Address (Number, Street, City, State, Zip Code)

Daytime Telephone Number

Block C - Subsistence Halibut Ceremonial Permit

- 1. Name of Alaska Native tribe or community
- 2. Ceremonial Halibut Permit Coordinator

Name (First, Middle, Last) Mailing Address (Number, Street, City, State, Zip Code) Daytime Telephone Number

3. Describe occasion of cultural or ceremonial significance

Block D - Subsistence Halibut Education Permit

- 1. Name of Alaska Native Tribe
- 2. Educational Halibut Permit Instructor

Name (First, Middle, Last) Daytime Telephone Number Mailing Address (Number, Street, City, State, Zip Code)

3. Educational Institution or Organization
Mailing Address (Number, Street, City, State, Zip Code)
Daytime Telephone Number

- 4. Course Description (add extra sheet if necessary)
- 5. Demonstrate enrollment of qualified students
- 6. Describe minimum attendance requirements
- 7. Describe standards for the successful completion of the educational program
- 8. Describe standards for successful completion of the course

Mail application to:

Restricted Access Management NMFS, Alaska Region P.O. Box 21668 Juneau, AK 99802-1668

If you have questions, call: 1-800-304-4846 or FAX: 907-586-7354.