



## APPLICATION FOR SCIENTIFIC RESEARCH AND COLLECTING PERMIT



If you are not using the automated system supporting this report process,  
please fill out this form and return it to the appropriate park.  
All or some of the information you provide may become available to the public.

<b>Name of the National Park System Area You Are Applying To:</b>					
<b>Select One of the Following:</b> <input type="checkbox"/> New application <input type="checkbox"/> Renewal of a previously issued permit <input type="checkbox"/> Modification of a previously issued permit			<b>Please Enter Numbers for Permit Renewal or Modification Requests:</b> Previously assigned NPS study number: Previously assigned NPS permit number:		
<b>Contact Information for the Current Principal Investigator</b>					
<input type="checkbox"/> Dr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<b>First Name</b>	<b>Last Name</b>		<b>Office Email Address of Principal Investigator:</b>	
<b>Mailing Address</b>			<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Name of the Current Institution Represented:</b>			<b>Office Phone</b>	<b>Alternative Phone</b>	<b>Office Fax</b>
<b>Additional Investigators or Key Field Assistants:</b> (first name, last name, office phone, office email)					
<b>Scientific Study Information</b>					
<b>Project Title:</b> (maximum 300 characters)					
<b>Purpose of the study:</b> (maximum 4,000 characters)					
<b>Does your study propose to involve any of the following?</b> (check all that apply)					
<input type="checkbox"/> Handle Live Vertebrates	<input type="checkbox"/> T&E Species	<input type="checkbox"/> Migratory Birds	<input type="checkbox"/> Marine Mammals		
<input type="checkbox"/> Unmanned Aircraft	<input type="checkbox"/> Designated Wilderness	<input type="checkbox"/> Hazardous Activity	<input type="checkbox"/> Ground Disturbance		
<b>Summary of Proposed Field Methods and Activities:</b> (extract from the study proposal, where appropriate - maximum 4,000 characters)					
<b>Study Schedule</b>			<b>Field Schedule</b>		
Initial starting date of the study:			Date to begin study within the park this application year:		
Estimated date the entire study may end:			Date to end study within the park this application year:		
			Will field study need to continue within the park next year? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Activity Type:</b> (select one) <input type="checkbox"/> Research <input type="checkbox"/> Inventory <input type="checkbox"/> Monitoring <input type="checkbox"/> Other:					
<b>Do you anticipate receiving funding assistance from the U.S. Federal Government for this study?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," specify the agency(s):					
<b>Where will data, maps, photos, etc. (not specimens) reside upon completion of this study?</b>					
<b>Location(s) Where You Propose Activities Will Take Place Within This National Park System Area:</b>					
<b>Your Proposed Method of Access:</b> (vehicles, aircraft, boat, snowmobile, foot, etc.)					





## APPENDIX A: PROPOSED REPOSITORY FOR COLLECTED SPECIMENS



If you are not using the automated system supporting this report process,  
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A principal investigator has requested permission to collect specimens for permanent retention in whole or in part and has requested that the specimens and/or material originating from such specimens be loaned by the U.S. National Park Service (NPS) to a repository that is not administered by the NPS. The principal investigator has been instructed to obtain the signature of the repository official(s) as part of the permit application. The following information should be completed and provided to the principal investigator. The principal investigator is responsible for ensuring the original signed form (or fax of the signed form) is received by the appropriate Park Research Coordinator. Each non-NPS institution proposed to receive loaned specimens or material originating from such specimens must complete this form. Note that all specimens collected and material originating from such specimens remain Federal property.

<b>Principal Investigator</b>		<b>Office Phone</b>	<b>Office Fax</b>	<b>Office Email Address</b>	
<b>Project Title:</b> <i>(maximum 300 characters)</i>					
<b>Scientific description of collected specimens and/or material originating from such specimens proposed to be loaned to the non-NPS institution identified below:</b> <i>(include taxonomic group or name, or type of material; sample size, quantity, frequency, and location)</i>					
<b>Organization Information</b>					
<b>Non-NPS institution where specimens and/or material originating from such specimens identified in the box, above, are proposed to be deposited:</b>					
<b>Institution</b>		<b>Office Phone</b>	<b>Office Fax</b>	<b>Responsible Official Email Address</b>	
<b>Address</b>			<b>City</b>	<b>State</b>	<b>Zip Code</b>
<i>This organization concurs with the proposal that collected specimens and/or material originating from such specimens identified above be loaned to this institution for the purposes of storage, management, and research subject to the "General Permit Conditions" and the terms of applicable National Park Service loan agreements (available from the park).</i>					
<b>Signature of Responsible Official at Custodial Institution</b>				<b>Date</b>	
<b>Name of Responsible Official</b> <i>(please print)</i>			<b>Title of Responsible Official</b> <i>(please print)</i>		

## NOTICES

### Privacy Act Statement

**Authority:** 54 U.S.C. 100101, National Park Service Organic Act; 54 U.S.C. 100751(a), Regulations; 54 U.S.C. 100705, National Parks Omnibus Management Act, Availability of System units for scientific study.

**Purpose:** The two primary uses of the records maintained in the system are to administer scientific research and collecting within units of the National Park System, and to make Investigator's Annual Reports available to the public.

**Routine Uses:** In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, records or information contained in this system may be disclosed outside DOI as a routine use pursuant to 5 U.S.C. 552a(b)(3) to other federal, state, local, tribal or foreign governments and organizations, and members of the general public based on an authorized routine use when the disclosure is compatible with the purpose for which the records were compiled as described under the system of records notice for this system.

**Disclosure:** Voluntary, however, failure to provide the requested information may impede the processing of your application for scientific research and collecting permit.

### Paperwork Reduction Act Statement

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) and National Parks Omnibus Management Act of 1998 (NPOMA, P.L. 105-391, Sections, Sections 201 (4), 201 (5), and 205 which govern the use of parks for study to benefit park management and broader science, and also publication of information derived from studies conducted in the National Park System. The National Park Service collects information about permit applicants and permittees to administer and document research, collecting, and reporting activities within parks. All applicable parts of the form must be completed in order for your request to be considered. Failure to provide the information may result in denial of your permit application. A Federal agency may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned OMB Control No. 1024-0236.

### Estimated Burden Statement

Public reporting burden for this form is estimated to average 1.38 hours per response, including the time it takes for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Comments regarding this burden estimate or any aspect of this form should be sent to the Information Collection Clearance Officer, National Park Service, 12201 Sunrise Valley Dr. (MS-242), Reston, VA 20192. Please do not send your completed application to this address.