Submit this form to Research Coordinator Justin Ridge (justin.ridge@deq.nc.gov).

Name:	
☐ Check if you are a student Advisor:	Degree:
Institution:	
Email:	Phone:
Address	
Project Title:	
Duration of field work:	
Project completed (final report submitted):	
Funding (source & annual amount):	
Project Contact (if different from above):	
Email:	
Expected number of participants for field work at Reserv	e site:
How were you informed of the requirement to apply for ☐ Reserve staff ☐ Reserve website ☐ Col Are you aware of the Reserve's long-term water quality a	leagues Other:
If so, what data, if any, do you plan to use for your re Island)?	
If not, please contact us or visit the NERRS Centralize	d Data Management Office.
☐ I have attached a 1-2 page project description that inclocations of sites within Reserve and list of sites outs	. , , , , , , , , , , , , , , , , , , ,
☐ I agree to (1) adhere to the research permit terms an submitting Final Report at the end of the project, and	· · · · · · · · · · · · · · · · · · ·
Signature:	Date:
Typed name will serve as an official electronic	signature.
To be filled out b	y Reserve Staff ———————————————————————————————————
Permit #:	Expiration Date:
Approved:	may be renewed Date:
Justin Ridge, Research Coordinator	-