

MLML CRUISE PLAN – R/V JOHN H.MARTIN

1. General Information

Cruise Date: _____ Departure Time: _____ Estimated Time of Return: _____

Date and Time of Loading: _____ Diving? _____ (You MUST complete diving clearance with MLML Dive Officer)

a. Is your charter MLML Supported or Outside Funded? (Circle one)

b. Purpose? (Check one) Class _____ Thesis _____ Research _____ Other _____

Billing Information

Institution/Agency/Company name: _____ PO# or Grant #(Required): _____

Billing Address: _____

Billing Contact Person: _____ Phone: (____) _____

2. Participant Information

Chief Scientist: _____ Phone #: (____) _____ Number in Party: _____

3. Float Plan

Area of Operation:

Type of Work:

Equipment/Boats/Technician Needed:

4. CA Fish and Wildlife Permit **

CA Fish & Wildlife Permit Holder Name: _____ Permit #: _____

24/hr. Notice of Collection: YES OR NO

****IMPORTANT:** Permit holder is responsible for notifying CA F&W in advance of collection and must complete the catch composition report on the back of this form. Permit holder must be on board with the permit. Monterey F & W Field Office # (831) 649-2870

5. AUTHORIZATIONS:

Signature of Chief Scientist (Faculty Advisor signature required for class or thesis work) DATE

Signature of MLML Director/Marine Superintendent DATE

POST CRUISE REPORT

Date of Cruise _____

Time of Departure _____

Time of Return _____

Synopsis of objectives met/comments:

SCIENTIFIC PARTY

VESSEL CREW

Signature of Captain

Date

DO NOT WRITE BELOW - OFFICE USE ONLY

INVOICE NUMBER: _____

SJSU RESEARCH FOUNDATION A/C #: _____

INVOICE DATE: _____

OBJECT CODE: _____

CUSTOMER ID: _____

QUANTITY (Hours): _____ HOURLY RATE: \$ _____

PO #: _____

PREP FEE (YES or NO) RATE: \$ _____ AMOUNT: \$ _____

EXTRA TECH SRVCS. (YES or NO) QUANTITY (Hours): _____ HOURLY RATE: \$ _____

TOTAL AMOUNT DUE: \$ _____