

MLML CRUISE PLAN

VESSEL: _____ R/V SHEILA B. _____ R/V JOHN H. MARTIN

1. General Information

Cruise Date: _____

Departure Time: _____ Estimated Time of Return: _____

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

a. _____ MLML Supported or _____ Outside Funded? (check one)

b. Purpose: Class _____ Thesis _____ Research _____ Education _____ Other _____ (check one)

Billing Information

Affiliation/Agency _____ Billing Address: _____

Account/PO#: _____

MLML Grant #: _____ (required) _____

2. Chief Scientist _____ Phone # _____ Number in Party _____

3. Float Plan

Area of Operation:

Type of Work:

Equipment / Technician Needed:

CA FISH & GAME PERMIT*

Name _____ Permit # _____

24-Hr Notice of Collection YES NO (649-2870)

***Permit holder is responsible for notifying CA F&G in advance of collection and must complete the catch composition report on the back. Permit holder MUST be on board with the permit.**

AUTHORIZATION

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 _____

Comments/Changes from cruise plan:

SCIENTIFIC PARTY

_____ VESSEL CREW

CATCH COMPOSITION REPORT*

<u>SPECIES</u>	<u>APPROX. NUMBER</u>	<u>SEX(If Known)</u>	<u>DISPOSITION</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Attach additional pages if necessary
Will submit when completed

Received _____

Signature of Captain _____

Date _____

Date Billed _____

Invoice# _____