

**CRUISE PROSPECTUS FORM**

SHIP NAME:

OPERATING INSTITUTE OR AGENCY:

PROJECT TITLE:

CRUISE DATES (INCLUSIVE):

ACTION REQUIRED:

**Research Clearance**

- Request State Dept. to Initiate
- Request State Dept. Advice
- Being Handled Privately – FYI
- None Required – FYI
- Other (Specify on Reverse)

**Port Call Clearance**

- Public Vessel – State Dept. Initiate
- Part of Research Clearance – State Dept. Initiate
- Being Handled by Ship’s Agent – FYI
- Unusual Problem – State Dept. Assistance

CRUISE COORDINATOR (name, affiliation, address, phone, fax, e-mail):

CHIEF SCIENTIST (name, affiliation, address, phone, fax, e-mail):

NUMBER OF SCIENTISTS: \_\_\_\_\_

SHIP DESCRIPTION:

LOA \_\_\_\_\_ Draft \_\_\_\_\_ Gross Tons \_\_\_\_\_  
Name of Master \_\_\_\_\_  
Number of Crew \_\_\_\_\_  
Radio Call Sign \_\_\_\_\_  
Emergency Frequency Monitored \_\_\_\_\_

FUNDING AGENCY(S):

COOPERATING INSTITUTION(S):

THE OBJECTIVE OF THIS RESEARCH IS TO:

ITINERARY:

Indicate Transit/Port Call/Research & Locations ..... Duration (Inclusive Dates)

ATTACHMENT (Cruise Chart)