Proposal to conduct research at The University of Mississippi Field Station

Name:  
E-mail:  
Phone:  
Name of P. I. or supervising faculty member on project:  
Department:  
If Students or technicians are involved in this project please provide list of names and contact info (phone and e-mail):  

Project Title:  

Brief project description:  

Anticipated dates and duration of project:  
Specific location of proposed work:  

Funding Agency if any:  

Brief description of project procedures:  

IACUC Number:  

Persons responsible for setting up structures, materials, equipment:  

Persons responsible for site clean-up following conclusion of research:  

The principal investigator and all persons working under their supervision here by agree to adhere to all Usage Policies and Procedures of the UM Field Station. These Usage Policies include but are not limited to:

1. The principal investigator or supervising faculty member will insure notification is sent to the Field Station office of the presence of any vertebrate animal designated for research purposes (as defined by the IACUC) while conducting research at the Field Station. Weekly notification is required if the researchers are unsure of the actual dates animals will be present.

2. The principal investigator or supervising faculty member agrees to cover the cost of all construction materials, research materials, research supplies and instrumentation used in the project.

3. The principal investigator or supervising faculty member is responsible for the removal of all materials, equipment, and structures upon completion of the project.

4. Upon completion of the project the person responsible for site clean-up will acquire the director’s signature indicating project completion.

5. A copy (paper or digital) of any reports, manuscripts or abstracts resulting from the research will be provide to the Field Station at the conclusion of the project.

P.I. Signature: __________________________ Date: __________________________

This research proposal has been approved / denied.

Director: ________________________ Date: ________________________

Completion and check out date: ____________ Director’s signature: ________________________