

**University Of California, Davis  
Scientific Boating Project Data Sheet**

New Project Request:

Project Renewal: UCD Boating Project # \_\_\_\_\_

Diving? ..... UCD Diving Project # \_\_\_\_\_

Please provide information to the following questions and send electronically to [Boating@ucdavis.edu](mailto:Boating@ucdavis.edu). Forms may sent by campus mail to:

**UC Davis, Office of Boating Safety**

**PO Box 247**

**Bodega Bay , CA 94923**

**1. Project Name or Title:** \_\_\_\_\_

**2. Principal Investigator(s):**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Dept \_\_\_\_\_

Email \_\_\_\_\_

**3. Person Submitting Request:**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Dept \_\_\_\_\_

Email \_\_\_\_\_

**4. Research Project Description and Goals: (use separate sheet if needed)**

**5. Special Conditions or Logistical Considerations:**

**6. Location(s) of Project:** \_\_\_\_\_

**7. Emergency Contacts & Procedures for Area of Research (use separate sheet if needed)**

*(example: USCG or Comparable Service, Nearest Medical Assistance, Float Plan, Communications, Other Vessels)*

**8. Project Boat(s):**

Vessel Owner: \_\_\_\_\_

Vessel Name / Numbers: \_\_\_\_\_

Vessel Length / Type: \_\_\_\_\_

Vessel Propulsion: \_\_\_\_\_

Vessel Owner: \_\_\_\_\_

Vessel Name / Numbers : \_\_\_\_\_

Vessel Length / Type: \_\_\_\_\_

Vessel Propulsion: \_\_\_\_\_

**9. Project Personnel**

Name / Role **OP**erator / **CR**ew / **OBS**erver

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10. Funding Source /Amount:**

\_\_\_\_\_

**FOR OFFICIAL USE ONLY**

UCD Boating Project #: \_\_\_\_\_

Renewal Date: \_\_\_\_\_

Comments / Restrictions:

Boating Safety Officer: \_\_\_\_\_

Signature

Date

**ADDITIONAL INFORMATION**  
**Field Site Maps / Sampling Procedures & Protocols**