

CRUISE PLAN --- R/V PACIFIC STORM

CRUISE DATE(S):	
Departure: (Date/Time)	
Mob:	
Demob:	
FILING DATE:	
CRUISE NUMBER: <i>(for office use only)</i>	
TITLE:	
CONTRACT/GRANT NUMBER:	
OSU INDEX CODE:	
PRINCIPAL INVESTIGATOR(S):	
Chief Scientist:	
Co-Chief Scientist:	

PURPOSE: (Short, non-technical statement on how cruise relates to overall project).

ITINERARY: (Include station positions and route waypoints. If you need more space, include this on additional pages.)

BILLING INFORMATION

Name:

Address:

City, State, Zip

Phone:

Account Number (or number to reference):

USING OSU INDEX CODE FOR PAYMENT:

List the **OSU Index code** here: _____

(include any Activity codes and Account codes as necessary).

When using an OSU Index code to pay for a cruise;

we require pre-authorization from the P.I. who is in charge of the Index code.

Signature of PI, or include an email, with this cruise plan, from the PI, stating his agreement for us to charge the cruise to his index.

WILL RADIOACTIVE METHODS BE USED?

- NO
 YES If yes, list OSU radiation use authorization number: _____

WILL YOU BE BRINGING HAZARDOUS MATERIALS ABOARD?

- NO
 YES If yes, you are responsible for providing the Master with an Inventory of such materials & associated MSDS sheets.

DO YOU WANT CELLULAR/INMARSAT PHONE ACCESS:

- NO
 YES Chief Scientist will be responsible for all charges – dedicated science phone.

SAMPLING PLAN:

EQUIPMENT REQUIRED:

OTHER BULKY HEAVY ITEMS:

Location (placement on deck):

Estimated Weight:

Primary Project Discipline: (Select all that apply)

- | | |
|--|---|
| <input type="checkbox"/> ◦ Physical Oceanography | <input type="checkbox"/> ◦ Geology & Geophysics |
| <input type="checkbox"/> ◦ Acoustics | <input type="checkbox"/> ◦ Mapping/Charting |
| <input type="checkbox"/> ◦ Chemical Oceanography | <input type="checkbox"/> ◦ Ocean Engineering |
| <input type="checkbox"/> ◦ Biological Oceanography | <input type="checkbox"/> ◦ Training |
| <input type="checkbox"/> ◦ Environmental Ecology | <input type="checkbox"/> ◦ Transit/Non-science |
| <input type="checkbox"/> ◦ Fish Investigation | <input type="checkbox"/> ◦ Pollution Assessment |
| <input type="checkbox"/> ◦ Climate/Meteorology | <input type="checkbox"/> ◦ |

Other: _____

SCIENTIFIC PERSONNEL TO BE ONBOARD: (Provide full legal name, gender, affiliation & Function *)

	Full Legal Name	Gender	Affiliation	Function *
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
	OSU Marine Technician(s) Assigned to Cruise:			

***Function Options:**

- Chief Scientist (CS),
- Co-Chief Scientist (CCS),
- Scientist-In-Charge (SIC), Party
- Chief (PC),
- Scientist (S),
- Research Assistant (RA),
- Graduate Student (GS),
- Undergraduate Student (US),
- Technician (T),
- Marine Technician (MT) Post
- Doc (PD)
- Observer (Ob)
- Volunteer (V)
- Foreign Observer (FOb) Higher-
- Ed Instructor (HI) K-12 Teacher
- (KT)
- K-12 Student (KS)

Additional information :

List any Dietary Restrictions:

Additional Cruise Info: