



**Wetlands Oversight Committee**  
 Phone: 425-352-5557 / Fax: 425-352-5431

**Wetlands Restoration Area SCIENTIFIC RESEARCH PERMIT REQUEST FORM**

Name of Principal Investigator	Position / Title	Organization	Department
Email	Phone Number	Fax	Dates of Access Requested

**Title of Study**

**Brief Description of Study (purpose, general approach / methods, types of data to be gathered)**

**What is the scientific / educational significance of the study? (Please indicate if this is a class project)**

**Why is it important that this study be done at the UWB-CCC wetland site?**

**What parts of the site will you need access to and when? (provide a timetable if possible)**

**Who will participate in this study?(names, affiliations, positions)**

- Route to:
- WOC
  - PPS
  - PS

<p>Will any materials be removed from the site (e.g., biological samples, water samples, soil samples, etc.)? Why? If so, provide amounts, locations, and a schedule for gathering of these samples.</p>		
<p>Will any materials (biological or non-biological) be added to the site or left on site (this includes plot markers, flagging, etc.)? Why? If so, describe where &amp; when these materials will be on site.</p>		
<p>Other impacts: The Wetlands Restoration Area is an ecologically sensitive restoration, home to native plant species, bird and animal wildlife. How are you going to manage your group to minimize impacts?</p>		
<p>How &amp; when will data / results be made available to the Wetlands Oversight Committee?</p>		
<p>Other comments &amp; information you wish to add</p>		
<p>Name of Requestor (Print)</p>	<p>Signature</p>	<p>Date of Request</p>
	<p>Phone No.</p>	<p>E-mail</p>

**INSTRUCTIONS**

1. Go to the following website for additional information and directions to the Wetlands: <http://www.uwb.edu/admin/wetlands>.
2. Forms must be completed and returned to Anthony Guerrero, Chair, Wetlands Oversight Committee. (Incomplete forms will not be processed, but returned for completion.) Attach additional pages if material you wish to submit exceeds the space provided.  
Email, Mail or Fax completed Access Request Form to:  
 Anthony Guerrero ; [aguerrero@uwb.edu](mailto:aguerrero@uwb.edu) or Box 358575; Physical plant (CP1); 11125 NE 180<sup>th</sup> St.; Bothell, WA 98011-1713 **OR**  
 Phone: 425-352-3557 Fax: 425-352-5431
3. Research Request Forms will be reviewed by the Wetlands Oversight Committee (WOC) at its meeting held the **2<sup>nd</sup> Wednesday of each month**. Some requests may be approved directly by the WOC. Other requests may be forwarded for evaluation and review by local experts not affiliated with the proposed research. We will endeavor to act upon each request as promptly as possible, with the constraints of our meeting schedule and external review needs.
4. Approval or denial will be sent out within 48 hours after the WOC decision.
5. You **MUST** notify Anthony Guerrero (contact information above) 24 hours in advance if you cancel your planned visit. This is necessary to notify appropriate Physical Plant and security personnel. You may request an alternate time for rescheduling at that time.

Route to:       WOC  
                      PPS  
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# Research Participation Form

The following form is required for all individuals participating in permitted research in the Wetlands Restoration Area.

I have read, understand, and will follow the Wetland Restoration Area Use Guidelines. I understand that I am responsible for my own safety while on site.

## Maximum Group Size: 25 People

Name (printed)	Signature	Organization
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