



# Woods Hole Oceanographic Institution - Shipboard Scientific Personnel

R/V \_\_\_\_\_ Voyage No. \_\_\_\_\_ Chief Scientist \_\_\_\_\_

Title (Dr.,Ms.,Mr.) & Full Name \_\_\_\_\_ Sex: M F Phone (Bus.) \_\_\_\_\_  
*(AS IT APPEARS ON PASSPORT)*

Affiliation (Inst./Employer) \_\_\_\_\_ e-mail \_\_\_\_\_

Position on Cruise \_\_\_\_\_ Student? Please check: Grad UnderGrad

Business Address \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

Citizen of \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ Passport No. \_\_\_\_\_ Passport Exp. Date \_\_\_\_\_

Person to Notify in Case of Emergency \_\_\_\_\_ Relationship \_\_\_\_\_

Their Address \_\_\_\_\_ Phone \_\_\_\_\_

**The following information is REQUIRED and vital for post-cruise reports. PLEASE FILL OUT ACCURATELY**

Is your work on this voyage part of the Full Title of Science Project	primary project,	ancillary project, or	other?
_____			
Sponsoring Agency (NSF,ONR, etc.) _____			
Grant/Contract Number _____	Discipline (Biology, etc) _____		
Principal Investigator _____	Current yr. Funding \$ _____		
Method of Payment for Cruise Expenses – P.I. _____	Purchase Order _____	Credit Card _____	Other _____
Payment Method Details _____			

**Medical Information:** The undersigned acknowledges that he/she has no physical defects or ailments which would prevent the performance of duties at sea for extended periods of time. If medication is required, adequate provision will be made prior to boarding the vessel for a supply of prescription drugs.

Not Applicable \_\_\_\_\_ Prescription Drugs (type) \_\_\_\_\_

Food Allergies / Dietary Restrictions \_\_\_\_\_

**Insurance Coverage:** Persons on board vessels operated by the Woods Hole Oceanographic Institution who are not employees or students of the Institution are considered SHIPBOARD GUEST INVESTIGATORS and are expected to make arrangements for all forms of insurance coverage while participating in research cruises. The Institution assumes no responsibility for non-employees; each must agree to hold the Institution harmless of all liability arising from participation in any voyage on a WHOI vessel.

**Alcohol Policy:** No alcoholic beverages of any type will be permitted on Institution vessels. All personnel, including scientific staff from other institutions and visitors, are affected by this regulation and must abide by it.

**Drug Policy:** Woods Hole Oceanographic Institution is a Zero Tolerance organization. The possession or use of any controlled substance will not be tolerated. Members of the embarked scientific party are subject to drug and alcohol testing under 46 CFR for reasonable cause and in the event of a "Serious Marine Incident" at the discretion of the Master.

In accordance with U.S. Customs Laws and procedures, the Master routinely searches the ship, including staterooms, prior to returning to a U.S. port from a foreign cruise. This search may include personal effects.

**Radioactive Materials Policy:** No radio isotopes will be permitted aboard ship without express approval from WHOI's Radiation Safety Committee and adherence to WHOI's Isotope User's Manual.

**Hazardous Material Policy:** Scientists must provide ship with Material Safety Data Sheets (MSDS) for ALL Hazardous Materials.

**Staying aboard Vessel** – Cruise participants are allowed to move aboard the night before departure and move off the day after arrival.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return this form to:** Barbara Costello, Marine Operations, MS#37 Woods Hole Oceanographic Institution, Woods Hole, MA 02543 one month **BEFORE THE CRUISE BEGINS**. FAX number (508) 457-2185.