

**NATIONAL CENTRE FOR ANTARCTIC AND OCEAN RESEARCH
HEADLAND SADA, GOA - 403 804**

**APPLICATION FOR INDIAN EXPEDITION TO SOUTHERN OCEAN
2015-16**

**NAME OF THE PRINCIPAL
INVESTIGATOR :**

TEL.: (Off.)

TEL.: (Res.)

POSITION :

ADDRESS :

FAX:

E-MAIL:

**NAME OF THE CO-PRINCIPAL
INVESTIGATOR :**

TEL.: (Off.)

TEL.: (Res.)

FAX:

E-MAIL:

PROJECT : MAJOR DISCIPLINE :

TITLE OF THE PROJECT :

Whether ongoing or a new proposal :

If ongoing programme, please mention accomplishment :

(Separate sheets [as annexure] should be attached with the ongoing/new proposals for detailed description about the project with

Introduction,

Rationale,

Objectives,

Materials & Methods,

Scientific problem to be addressed by the execution of the project,

Results from Previous Studies,

Expected Outcome):

SCIENTIFIC AIMS & OBJECTIVES :

Proposed onboard observations and sampling along the cruise track

NAMES & AFFILIATIONS OF CRUISE PARTICIPANTS (PI/Co-PI/any responsible regular scientific staff should participate in the expedition) :

DETAILS OF THE PASSPORT (Cruise Participants) :
Please indicate, number, place of issue, date of expiry, official/personal

SAMPLE STORAGE REQUIREMENTS:

INSTRUMENTS PROPOSED TO BE CARRIED TO SOUTHERN OCEAN

(Name of the instrument and approximate weight) :

Please mail completed forms to Dr. N. Anilkumar, Programme Manager Southern Ocean Expedition, National Centre for Antarctic & Ocean Research [NCAOR], anil@ncaor.gov.in; anilncaor@gmail.com

Tel L 0832- 2525512/513 Fax : 0832-2525512

with a copy to the Director, National Centre for Antarctic & Ocean Research, Headland Sada, Goa 403 804 at director@ncaor.gov.in

Signature of the PI :

(Endorsement from the Head of the Institute/Organization)

1. Certified that Institute has no objection to the implementation of the above project and the participation of the above officials in the proposed field studies at Southern Ocean Expedition 2015-16.
2. Certified that the requisite laboratory infrastructure and administrative facilities will be extended to PI through out the duration of above mentioned project.
3. Certified that Institute will take financial and management responsibilities of the project as per the existing rules of the Institute.
4. Certified that participants recommended have been declared medically fit by the recognised medical authority.

Name and Signature of
Head of the Institute/Organization
SEAL
