



THE UNIVERSITY OF TEXAS AT EL PASO



Request Form for Research Activities at IMRS

Name: _____

E-mail address: _____

Phone (cell preferred): _____

Campus Address (Dept/Bldg/Room/Mail code) _____

Name and department of major professor: _____

Collecting permits (if applicable): _____

Brief description of research project: (or attach a copy of proposal abstracts, either from a grant or graduate committee):

Describe in detail (if applicable) amount of organisms/soil/rock/water samples that will be collected.

Describe Space & Utility Requirements:

Requested duration of research from _____ to _____

List the name and role of additional personnel participating in the project:



I agree to the following:

1. I will provide an annual report summary, and such information may be used on the field station website and other reports.
2. I will provide a copy of data collected on habitats and wild-living organisms (other than cultures or manipulations) as soon as the study is complete.
3. I will remove everything associated with the experiment on its termination, restore disturbed areas, and return all keys.
4. I will acknowledge IMRS in all publications and reports that utilize the facilities and send a copy to the Director.
5. I agree that UTEP has no liability for damage or injury to my person or property and I have signed the Release and Indemnification Agreement.
6. I agree to abide by all IMRS policies (including prohibitions on alcohol, tobacco and misconduct), to follow the IMRS guidelines in the IMRS handbook and instructions given by the IMRS Director.

Signature: _____ Date: _____

For IMRS Use Only

Approved by IMRS Director:

Date: _____