

City of Boulder Open Space and Mountain Parks

Mailing Address: 2520 55th Street, Boulder, Colorado 80301; 303-441-3440 http://www.osmp.org

Application for Field Course Projects

Date of Application				
I. I'm' In I and I and Andrew December 1				
Individual and Institution Requesting Permit				
Mailing Address				
E-Mail Address				
Phone				
I Title of Research/Field Course				
II Locations – List all sites for research/teaching (Please include map)				
III Dates of Research/Field Course – Permit expires on completion date				
Start Date of Research/Field Course				
Completion Date of Research/Field Course				

	clude the total number	of students, teachers,	and TAs, and the group size for each
V. Calledian D	A 11 A	OCMD 1- in aliman	
V. Collections. Do you propose YES NO		OSMP during this pro	ject ?
If yes, please describe what you	would like to collect, the lect, a justification for	your proposed collect	posed collection, the number of cion, and a statement on the potential
V Possible Wildlife/Environm	ental/Visitor Impacts	of your proposed pr	oject. — Please consider carefully.
			guarantee delivery of a copy of a fina
report to the City of Boulder Op Signature of Class Advisor/Prof	•	Parks by the end of t	he year. Date
Signature of Class Advisor/Prof	CSSUI	1 HOHE	Daic

(Failure to deliver report may jeopardize future study approval)