



**Ocean Exploration
and Research**

**NOAA Office of Ocean Exploration and Research
FY20 Funding Opportunity
Cover Sheet**

PROJECT TITLE (100 character limit)				
PRIORITY THEME Check all that apply		<input type="checkbox"/> Ocean Exploration	<input type="checkbox"/> Technology	<input type="checkbox"/> Marine Archaeology
CONTACT INFORMATION				
Principal Investigator				
Institution				
Mailing address				
		Email:	Phone:	Fax:
1) CO-PI Name				
Institution				
Mailing address				
		Email:	Phone:	
2) CO-PI Name				
Institution				
Mailing address				
		Email:	Phone:	
Significant participant 1		Name & institution:		
Significant participant 2		Name & institution:		
BUDGET SUMMARY (information will auto-complete based on the budget table on page 2)		Year 1 OER request:	Year 2 OER request:	Total OER funding request:
		Number of years:	1 year 2 years	Award period:
Collaborating Institutions		Nature of collaboration		Value (Outside Support Only)
1)				
2)				
3)				
				Total value
INFORMATION FOR FIELD OPERATIONS		Estimated field dates	Total # field days	Max depth
		Approx Lat/Long		
Description of geographic operation areas (eg., Western North Atlantic: Blake Ridge, Eastern North Pacific: Cascadia Margin)				

OER FUNDING REQUEST FOR VESSEL INFORMATION (Be sure to include the cost as a line item in the OER budget estimate table below.)			
1) Vessel name:		Total cost:	
Institution:		Cost per day:	Number of days:
2) Vessel name:		Total cost:	
Institution:		Cost per day:	Number of days:
OER FUNDING REQUEST ANCILLARY PLATFORM (ROV, AUV, HOV, etc.) INFORMATION (Be sure to include the cost as a line item in the OER budget estimate table below.)			
Platform type:		Total cost:	
Platform name:		Cost per day:	Number of days:
CONTRIBUTED VESSEL AND ANCILLARY PLATFORM (ROV, AUV, HOV, etc.) INFORMATION (Provided at no cost to this grant. DO NOT include value in the OER budget estimate below.)			
Vessel name:		Total cost:	
Institution:		Cost per day:	Number of days:
Platform type:		Total cost:	
Platform name:		Cost per day:	Number of days:
BUDGET ESTIMATE (OER Request)	YEAR 1	YEAR 2	TOTAL
Salary and Benefits:			
Travel:			
Equipment and Supplies:			
Contractual:			
Other:			
Indirect Charges:			
TOTAL:			
EDUCATION AND OUTREACH (Check any that apply to you)			
<input type="checkbox"/> Berthing for educator-at-sea	<input type="checkbox"/> OER website contributions	<input type="checkbox"/> Educational materials (ex. lesson plans)	
<input type="checkbox"/> Port call events	<input type="checkbox"/> Press releases/Media interviews	<input type="checkbox"/> Other _____	
ADDITIONAL COMMENTS			