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## **Application for Scientific Plant Research Permit**

1.	Applicant's Prefix (Mr. , Ms., Miss, Mrs., Dr.):			Home Phone:			
	Name:		Office Phone:				
	Middle Name: Suffix:  Date of Birth:						
	Street Address:		Social Security Number <sup>1</sup> :				
				E-mail:			
	City:	_ State: Z	'ip:	2 <sup>nd</sup> E-mail: _			
2.	Facility Name (business name	e):					
	Facility Physical Address:						
	City:		State:	_ Zip:	Country:		
3. 4.	Use (PWD 0381A-W7000) to (Check if form is attached.) Applicant is employed/repre		_	ou wish to be na	-	t. No	
	a. University or College	e		d. Commerc	ial Firm	<del></del>	
	b. Federal Agency			e. Land Trust			
	c. State or Local Agend	су		f . Other			
5.	State current position and br	iefly state edu	ucational and bid	ological training	(include degrees he	eld):	
6.	Research Objective (attach n	nandatory for	mal research pro	pposal):			
7.	Justification for proposed act	civities:					
8.	Procedures [collection metho	ods/devices (i	f applicable)]:				
$\Box$							

<sup>&</sup>lt;sup>1</sup>Texas Parks and Wildlife Department maintains the information collected through this form. With few exceptions, you are entitle to the information about the information we collect. Under Sections 552.021 and 552.023 of the Texas Government Code, you are also entitle to receive and review the information. Under Section 559.004.you are also entitled to have this information corrected. PWD 0381–W7000 (08/18)



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9. Research Locations (includ	Research Locations (include county):								
10. Projected Start Date:		Projected Completion Date:							
11. List the approved herbaria	List the approved herbaria where voucher sheets of collected specimens are anticipated to be deposited.								
	List specimens to be handled. (Insert additional rows if necessary)								
Scientific Name	Co	mmon Name	Number of Specimens		Specimens				
14. Applications <b>must be</b> accor	<ol> <li>Applications must be accompanied by two letters of recommendation from two people in the field of botany or horticulture attesting to the professional status or competence that qualifies the applicant to conduct the proposed research. (Check if letters attached.) YesNo</li> </ol>								
15. Applications <b>must be</b> according under the jurisdiction of the		·=·		•	ove plants on lands No				
is my intention to collect and/or hereby declare that the above state at making a false statement on the prisonment. I shall complete and port and/or publication relating the received by the Texas Parks and Note.	ements made by me this application or ir d submit an annual r to the permitted act Wildlife Department	are true and correct to n subsequent annual re eport on a form provicivities shall also be sub	the best of eports is a ded by the omitted to ion within	of my knowled crime punish department. the departme 14 days after i	ge, and I understand nable by fine and/or . A copy of any fina ent. This report shal				
Signature of Applicant	(Required)		Date (Re	quired)					

NOTE: This application will not be considered unless fully completed. Falsifying information on this document is a punishable offense. Please submit: A complete and signed application, a research proposal detailing the use of protected plants, two letters of recommendation, attach any supplemental documentation (i.e. federal permits held, list of sub-permittees, etc.) and mail to:

Texas Parks and Wildlife Department Wildlife Diversity Permits Section 4200 Smith School Road Austin, TX 78744