**IMOS Animal Tracking Facility**

**2025 Acoustic Receiver Loan Program**

Application Form

1. **Project Title**
2. **Applicant Details**

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| (a) Project Leader |  |
| Name |  |
| Position |  |
| Institution |  |
| Address |  |
| Phone  |  |
| Email |  |
| (b) | **Supervisor/Co-investigator 1** | **Supervisor/Co-investigator 2** |
| Name |  |  |
| Position |  |  |
| Institution |  |  |
| Address |  |  |
| Phone  |  |  |
| Email |  |  |

1. **Project details**

*Please note the information you provide for this section may be used by the IMOS Animal Tracking Facility for internal reports, activity summaries and media communications.*

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| (a) Project Aims and Summary (/10) *500 words max* |
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| (b) Significance and IMOS Objectives (/10)*500 words max* |
| Describe the significance of this project describe how your project meets the objectives of IMOS ATF and/or contributes to the current national network. For more information on the objectives of IMOS and the Animal Tracking Facility (ATF), please visit <http://imos.org.au/> and <https://imos.org.au/facility/animal-tracking>.  |

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| (c) Expected Outputs (/10)*Including reports, publications, press releases, scientific posters/presentations* |
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1. **Project plan**

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| (a) Project method (/15)*Please include maps and diagrams if available, as appendices. 500 words max.*  |
| * Mooring specifications (include diagrams)
* Type of installation (e.g. array or curtain)
* Deployment and recovery methods
* Range testing procedure
* Tag type and tagging method
* Data analysis
* Project timeline (displayed in Gantt chart form, including estimated date of receiver return to IMOS ATF).
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| (b) Budget (/2)*Please provide a detailed budget as an appendix.*  |
| * Do you have sufficient funds to feasibly complete the project or a plan to acquire funding? Please provide details on the funding body and expected date of fund availability.
* What funding applications will be used (if any) to help support the acoustic installation beyond the life of this Receiver Loan?
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| (c) Number of VR2Tx Receivers Requested (/1)*Please indicate if some receivers have already been acquired from other sources.*  |
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| (d) Permits/approvals and liability acknowledgement (/2) |
| a) Does the project require approval from an ethics committee? If yes, provide ethics approval number or date at which approval is expected to be granted.  |  |
| b) Does the project require any permits/approvals from a State or Commonwealth government authority*?* If yes, provide permit number or date at which permit is expected to be granted.  |  |

*Please note, successful applicants will need to accept the Terms and Conditions of the Acoustic Receiver Loan Program, including that the applicant will be financially liable for all lost and/or damaged receivers.*

**Signature:**

**Date:**

**Appendix**