



Fisheries Division
Ministry of Agriculture, Lands, Fisheries and Barbuda Affairs
Point Wharf
St. John's Antigua
fisheriesantigua@gmail.com
268-462-1372



Application to Conduct Marine Research in Antigua and Barbuda

Section 54 of the Fisheries Act allows the Minister to grant approval for the conducting of marine research in the waters of Antigua and Barbuda based on a plan approved by the Chief Fisheries Officer. Such research will be subject to terms and conditions to be set out by the Minister including the provision that data from such collection must be made available to the Chief Fisheries Officer within a reasonable time period after the research has been completed, as outlined in Section 58 of the Fisheries Regulations 2013.

Applicant Information

Full Name:	<div><div>Last</div><div>First</div><div>M.I.</div></div>			
Organisation:				
Address:				
	City	State	Country	Zip Code
Phone:			Email	

Main Investigators (Attach CVs of all researchers on the team)

Principal Investigator:	<div><div>Last</div><div>First</div></div>		Title Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/>	
Position/Title:				
Organisation/Institution				
Address				
Phone:			Email:	
Other Investigator:	<div><div>Last</div><div>First</div></div>		Title Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/>	
Position/Title:				
Organisation/Institution				
Address				
Phone:			Email:	

Project Details

Descriptive Project Title _____

Type of Application _____

Brief Project Outline

(Attach separate sheet of additional space is needed)

Project Duration

Start Date: _____

End Date: _____

Project Objectives

Sampling Request

Will your project require sampling of marine organisms?

Yes: ☐

No: ☐

If Yes, Please list species and numbers. *(Attach a list of any additional species not listed herein)*

Species:

Quantity:

Species

Quantity:

Species

Quantity

Species

Quantity:

Sampling techniques

Outline Sampling protocol

(If additional space is needed please attach a separate sheet)

Disclaimer and Signature

I certify that the information presented herein is true and accurate at the time of signing. I understand that false or misleading information in my application may result in a denial or withdrawal of any permission granted. I agree to be bound by the terms and conditions set out by the Minister Responsible for Fisheries through the office of the Chief Fisheries Officer for the duration of the research.

Signature: _____

Date: _____