	,	A	IRC	RAFT SUF	POF	RT RE	QUES	Т					
	Electronically submit the form to: OMAO.Fleet.Council.AWG@noaa.gov, or Fax the form to: 301-713-1541 or Mail the form to:												
1.	Office of Marine and Aviation Operations, MAOC; 8403 Colesville Road, Suite 500; Silver Spring, MD 20910-6333 1. PROJECT NAME (and brief description)												
	NOAA LONG-TERM GOAL (supported	-	ission –	- select all that a	ınnly sh	now nero	entages se	e instruction	ons for more	information	1		
	Unknown %	CAM	%		NRN	%	erruges, so	HO	%	RC		%	
3	NOAA LONG-TERM GOAL OBJECTIVE							110	,,,		-	,,,	
J.	Primary	(Supported by the	z projec	20,1111331011)		Secoi	ndarv						
4	FIELD of SCIENCE CATEGORY (see Ins	tructions)			5 N			(see Instru	rtions)				
		,											
6.	ABSTRACT of PROPOSAL (provide a b	orief description o	f the pr	ogram or the pr	oject, u	se Contir	าuation Pag	ge if necess	ary)				
7.	7. PERFORMANCE METRICS (describe performance measures / metrics that can be used to determine project success and performance measures / metrics under the control of OMAO that will contribute to project success, and how they will be collected, use Continuation Page if necessary)												
8.	IMPACT to NOAA LONG-TERM GOAL	S (describe the im	pact to	NOAA and the r	nation if	f this pro	ject is not	funded, use	· Continuatio	on Page if nec	essary	·)	
9.	REQUESTED PROJECT START DATE			10. TO	OTAL NUME	ER OF PROJ	ECT DAYS						
11.	REQUESTED FLIGHT HOURS	REQUESTED FLIGHT HOURS 12. REQUESTE											
13.	PLANNED FLIGHT HOURS PER MONT	H (for monthly re	oorting)									
	OCT NOV DEC	JAN	FEB	MAR	APR		MAY	JUN	JUL	AUG	S	SEP	
14.	PROJECT AREA (staging location and	area of operation	ıs)										
15.	FLIGHT PROFILES (altitude, speed, du	iration, time of da	y, requ	ired weather co	nditions	s, estima	te of scien	ce crew cor	nplement, e	tc.)			
16. Are aircraft modifications, special instrumentation, or other unique installation						s required? YES NO (If yes, see Instructions)							
17.	Have all project participants complie	d with the NOAA	Aviatio	n Safety Policy (I	NAO 20	9-124)?	YES	YES NO (If no, see Instructions)					
18.	Are dropsondes required for the pro	ject?					YES	NO	(If yes	(If yes, how many?)			
Is program funding available to purchase required dropsondes?							YES	NO	(If no,	(If no, see Instructions)			
19. Will any foreign nationals require access to NOAA aircraft or the Aircraft Operation						Center?	YES	NO	(If yes,	, see Instructi	ons)		
Has a department sponsor / NOAA (DSN) been assigned?							YES	NO	(If no,	see Instructio	ns)		
Have NAO 207-12 Appendix B and Line/Staff Office endorsement forms been su						abmitted? YES NO (If no, see Instructions)							
20. If a NOAA aircraft is not available or economical, will a charter aircraft support t							YES	NO	(If no,	see Instructio	ns)		
21.	1. FUNDING SOURCE (check all that apply) NOAA Aircraft Services Funds						ogram Fun	ds	non-NOA	A Funds		Unknown	
22. PRINCIPAL INVESTIGATOR (primary point of contact)						23. FUNDING SPONSOR (executive authorized to sign financial operating plan)							
NAME LINE OFFICE					NAN	NAME LINE OFFICE							
E-MAIL ADDRESS						E-MAIL ADDRESS							
WORK ADDRESS						WORK ADDRESS							
CIT	CITY STATE ZIP			CITY	CITY STATE					ZIP			
PHO	PHONE NUMBER FAX NUMBER			PHC	PHONE NUMBER FAX NUMBER								
SIGNATURE DATE				SIGN	SIGNATURE DATE								
					24.	24. OMAO ASSIGNED CHARTER CLEARANCE NUMBER							
					SIGN	NATURE					DA	ATE	

NOAA Form 57-11-51		U.S. DEPARTMENT OF COMMERCE						
(5-12) Page 2 of 2		NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION						
	AIRCRAFT SUPPORT REQU	EST						
Continuation Page								

NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION

AIRCRAFT SUPPORT REQUEST

Instructions

- Block 1. PROJECT NAME List the project name and briefly describe the mission (e.g. Passenger transportation to a policy meeting).
- Block 2. NOAA LONG-TERM GOAL Check the appropriate block(s) and identify the percentages supported if selecting more than one Long-Term Goal.

CAM = Climate Adaptation and Mitigation

HO = Healthy Oceans

WRN = Weather Ready Nation

RCCE = Resilient Coastal Communities & Economies

- Block 3. NOAA LONG-TERM GOAL OBJECTIVE Select the primary and secondary objective(s) within the Long-Term Goal(s) that are supported by the Project / Mission. See http://www.ppi.noaa.gov/ngsp/goals/ for NOAA's Long-Term Goals and Objectives.
- Block 4. FIELD OF SCIENCE CATEGORY Select the primary and secondary category from the following list:
 - (1) Basic Research (not applicable to NOAA)
 - (2) Applied Research is primarily interested in a practical use of knowledge or understanding for the purpose of meeting a recognized need.
 - (3) Development Directed is systematic use of the knowledge and understanding gained from research directed toward the production of useful materials, devices, systems, or methods, including design and development of prototypes and processes.
 - (4) Non R&D routine product testing, quality control, mapping and surveys, collections of general purpose statistics, experimental production, and activities concerned primarily with the dissemination of scientific information and the training of scientific staff.
- Block 5. NATIONAL SCIENCE FOUNDATION (NSF), RESEARCH & DEVELOPMENT (R&D) CATEGORY Select the primary and secondary category from the following list, if applicable:

N/A if Block 4 field, NSF code, is 4 (non R&D) 41 Aeronautical Engineering 59 Life Science 11 Astronomy 42 Astronautical Engineering 61 Biological Psychology 12 Chemistry 43 Chemical Engineering 69 Psychological Science 71 Anthropology 13 Physics 44 Civil Engineering 19 Physical Science 45 Electrical Engineering 72 Fconomics 75 Political Science 21 Mathematics 46 Mechanical Engineering 22 Computer Science 47 Metallurgy & Materials 76 Sociology 29 Math / Computer Science 49 Engineering 79 Social Sciences 31 Atmospheric Science 51 Biological 80 Cryogenics (NIST) 54 Environmental Biology 81 Measurement (NIST) 32 Geological Science 55 Agricultural 82 Other Engineering (NIST) 33 Oceanography 39 Environmental Science 56 Medical 99 Other Science

- Block 6. ABSTRACT of PROPOSAL Describe the Project / Mission, use Continuation Page if necessary.
- Block 7. PERFORMANCE METRICS Describe performance measures / metrics that can be used to determine project success, and performance measures / metrics under the control of OMAO that will contribute to project success, and how they will be collected. (e.g. cover 100% of the central 50% of the survey area calculated by nautical miles of designated flight tracks flown within the survey area; aircraft and crew complete tasked mission in accordance with established requirements; aircraft and crew available 95% of days meeting defined survey criteria; AOC supplied instrumentation functional for 100% of required mission; user supplied instrumentation installed on time; or aircraft and crew available to begin project on time; etc.)
- Block 8. IMPACT to NOAA LONG-TERM GOALS Describe the impact to NOAA and the nation if this project is not funded. Use the Continuation Page if necessary.
- Block 9. REQUESTED PROJECT START DATE, END DATE Indicate the first and last day of project activities.
- Block 10. TOTAL NUMBER OF PROJECT DAYS Indicate total number of project days requested.
- Block 11. REQUESTED NUMBER OF FLIGHT HOURS Indicate the total number of flight hours requested.
- Block 12. REQUESTED AIRCRAFT TYPE Indicate the type of aircraft if a specific type is required; otherwise list characteristics such as high wing, multi-engine, etc.

AIRCRAFT SUPPORT REQUEST

Instructions

- Block 13. PLANNED FLIGHT HOURS PER MONTH Indicate the number of hours planned for the project by month.
- Block 14. PROJECT AREA Indicate the location of the project in general terms.
- Block 15. FLIGHT PROFILES Indicate the flight profiles that are required to successfully complete the project / mission.
- Block 16. Are aircraft modifications, special instrumentation, or other unique installations required? Answer YES or NO. If yes, explain on the Continuation Page and also define a fully mission capable aircraft, a partially mission capable aircraft, and a non-mission capable aircraft with respect to the project / mission, and modifications or instrumentation needed. Instrumentation specifications required include description of instrument, weight, power requirement, mounting location, and any additional special requirements. This provides AOC with information about whether the aircraft modifications are required, extent of effort required, and helps to provide accurate cost information.
- Block 17. Have all project participants complied with the NOAA Aviation Safety Policy (NAO 209-124)? Answer YES or NO. If no, explain on the Continuation Page. NAO 209-124 identifies the training requirements for NOAA personnel to conduct operational flights.
- Block 18. Are dropsondes required for the project? Answer YES or NO. If yes, indicate the number required. If no, skip to block 19.
 - Is program funding available to purchase required dropsondes? Answer YES or NO. If no, explain on the Continuation Page.
- Block 19. Will any foreign nationals require access to NOAA aircraft or the Aircraft Operations Center? Answer YES or NO. If yes, explain on the Continuation Page. If no, skip to block 20. See (http://deemedexports.noaa.gov/) NOAA Deemed Export Technology Control Program for deemed export regulations and other access control procedures.
 - Has a department sponsor / NOAA (DSN) been assigned? Answer YES or NO. If no, explain on the Continuation Page.
 - Have NAO 207-12 Appendix B and Line/Staff Office endorsement forms been submitted? Answer YES or NO. If no, explain on the Continuation Page.
- Block 20. If a NOAA aircraft is not available or economical, will a charter aircraft support the project? Answer YES or NO. If no, explain on the Continuation Page. Indicate intent or acceptability of outsourcing this project if a NOAA aircraft will not be available to support the project due to schedule conflicts or cost.
- Block 21. FUNDING SOURCE Indicate the funding source by checking the appropriate block(s).
- Block 22. PRINCIPAL INVESTIGATOR (primary point of contact) Provide all of the requested information for the Principal Investigator. Sign and date the form.
- Block 23. FUNDING SPONSOR (executive authorized to sign financial operating plan) Provide all of the requested information for the Funding Sponsor. Sign and date the form.
- Block 24. OMAO ASSIGNED CHARTER CLEARANCE NUMBER The clearance number is required for Aircraft Charter as per NAO 216-104, section 7.03. Clearance must be obtained from OMAO prior to chartering aircraft for mission flights. OMAO will fill in this block and return a copy to the Principal Investigator, if a charter is required.

See http://www.corporateservices.noaa.gov/ames/administrative_orders/chapter_216/216-104.html for more information.