

SEYCHELLES BUREAU OF STANDARDS

P. O. Box 953, Victoria, Mahé, Republic of Seychelles

Tel: 4380400 Fax: 4373826 E-mail: sbsorg@seychelles.net

Homepage: - www.sbs.sc



Please address all correspondence to the Chief executive Officer

APPLICATION TO CARRY OUT RESEARCH WORK IN SEYCHELLES

(To be submitted three month before starting/arrival date)

1. Name and Address of Applicant:

Tel:

Fax:

E-mail:

2. Name and Address of main sponsoring organisation:

3. Details of Available Finance:

| Sponsoring Organisation | Value of Grant Available |
|-------------------------|--------------------------|
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| | |

4. Summary of Research Activity intended to be carried out in Seychelles:

(Attach copy of research project memorandum)

5. Dates of Visit:

| Arrival | Departure |
|---------|-----------|
| | |

6. **Number of researchers/assistants in your party:**

7. **Internal travel in Seychelles:** *(please tick appropriate section)*

(a) by normal scheduled transport? ☐

(b) by special vessel? ☐

(Please specify vessel)

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8. **Do you propose to use any radio transmission equipment during your visit (e.g. radio transmitter, walkie talkie)?**

YES ☐

NO ☐

If YES, please give the following details:

| Type of Radio Transmitter | Power | Frequency | Number of Transmitters |
|---------------------------|-------|-----------|------------------------|
| | | | |
| | | | |
| | | | |

Please state the reasons why these equipment are necessary:

9. **Names of islands to be visited in connection with your research:**

10. **Do you propose to collect specimens and/or other samples:**

YES ☐

NO ☐

If YES, please complete the following:-

| Description of Specimens/Samples <i>(Please indicate scientific names where appropriate)</i> | Quantity to be collected |
|--|---------------------------------|
| | |
| | |
| | |
| | |
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| | |

(Attach separate list if necessary)

11. Will you be taking any photographs during your visit?

- (a) still photography YES ☐ NO ☐
- (b) cine photography YES ☐ NO ☐
- (c) aerial photography YES ☐ NO ☐

12. Permission to carry out research activities in Seychelles is conditional on a guarantee by you that you will present to SBS free copies of any document, including articles, report, etc... published on any aspect of your visit to Seychelles.

YES ☐ NO ☐

13. Have you been in touch with any person in Seychelles in connection with this application?

YES ☐ NO ☐

If **YES**, please state the name of the officer with whom you have been in touch.

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14. Contact address in Seychelles:

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Signed **Date**