

Hawaiian Islands Humpback Whale National Marine Sanctuary
O'ahu Hi'ialakai Education Cruise

Name of Applicant (Teacher): _____

Name of School/Program: _____

Address of School/Program: _____

Phone #: _____ **Email:** _____

Alternate Phone(s) #: _____

Fax #: _____

What is the best way & time to reach you? _____

Grade level(s) that you teach: _____

Pertinent classes that you teach: _____

You will be required to select six students to represent your school, please explain how you would go about selecting them (essay, interest, achievement, etc.):

Please explain how you would relate this experience and information to other students who were not selected to attend so that they could gain from the experience:

Have you (as a teacher) ever had the opportunity to participate in an at-sea program? If so, please provide the name and year of the program:

This program is scheduled to take place on November 2nd and November 5th, 2009. Which date would you prefer if selected?

You would be required to arrange transportation for yourself and the selected students to a Honolulu port location (to be determined). Are you able to provide approved transportation for yourself and your students?_____

Please list any other comments that you would like us to consider during the

Please submit this form by fax or email by October 16, 2009 to:

Attn: Christine Brammer

NOAA's Hawaiian Islands Humpback Whale National Marine Sanctuary

Fax: (808) 397-2650

E-mail: Christine.Brammer@noaa.gov