EDUCATIONAL PROGRAM APPLICATION AND RENEWAL USE OF PROTECTED WILDLIFE FOR EDUCATIONAL PURPOSES



Permit Fees:

Application......\$15.00 Renewal......\$15.00 Amendment.......\$15.00

NEW MEXICO DEPARTMENT OF GAME & FISH FIELD OPERATIONS DIVISION SPECIAL USE PERMITS PROGRAM P.O. BOX 25112 SANTA FE, NM 87504

505-476-8070 / Fax 505-476-8133 Email: DGF.Permits@state.nm.us

FOR DE Payment Type Amount \$	EPT. USE ONLY e/#
Date Initials	//

Allow a processing time up to six weeks, applicants must ensure completeness of application. Missing documentation will delay the process and applications will not be reviewed until all the requirements are met. Additional details may be requested. If approved, you will be issued a permit that stipulates the specific activities you will be authorized to conduct. A valid permit must be issued before conducting activities and approval is not guaranteed. Annual reports from the previous year are required prior to permit renewal. APPLICATION RENEWAL AMENDMENT						
NAME			EMAIL			
BUSINESS NAME			WEBSITE			
ADDRESS (mailing)			ADDRESS			
CITY, STATE, ZIP			(physical)			
TELEPHONE			CELL			
DATE OF BIRTH			FAX			
·						
PERMIT No. (if applicable)			LAST YEAR (OF PERMIT ISS	SUANCE	
REQUESTED TIME FRAME All permits expire December 31st Initial permits issued for 1 year, 3 year max on renewals END DATE END DATE						
		FEE EXEMP	TION			
Applicants are exempt from the required annual fee when activities are part of your official duties as a Federal or New Mexico state employee or local agency employee, or a designated cooperator with the NMDGF. If you are not exempt, include a check or call 505-476-8070 with credit card. If exempt, provide a brief statement of explanation below:						
FEDERAL PERMIT REQUIREMENTS						
If requested activities involve federally protected species, have you received a federal scientific permit or banding permit?						
NO, not required	Pend	ing Approval	YES, po	ermit type/number	Attach	a copy of permit

WILDLIFE REQUESTED

Provide a detailed list of protected wildlife for which you are requesting take and possession (see regulation 19.35.6 NMAC for definitions of "take" and "protected wildlife"). Attach additional pages if necessary.

Common Name		Scientific Name	Acquiring From (include name and permit number/type)		Unique Identification (Microchip # or other)	
		SALVAGE AUTHO	ORIZATIO	N		
	NEW MEXIC	O RESIDENTS		NON-RESIDENTS		
	BIRDS			BIRDS		
	FURBEARER	R		FURBEARER		
	GAME			GAME		
	REPTILES Threatened/Endangered			REPTILES		
AMPHIBIANS Threatened/Endangered			AMPHIBIANS			
MAMMALS Threatened/Endangered			NON-GAM	IE MAMMALS		
JUSTIFICATION OF S			OF SALVA	GE		

DISPOSITION OF WILDLIFE					
e.g. Live wildlife and/or wildlife parts for educational programs. Include final dispositions of unintentional casualties, in what institution will the wildlife be deposited, if no specific preference is listed, final disposition will be to the Museum of Southwestern Biology, University of New Mexico, Albuquerque, NM.					
DIETS AND FOOD SOURCE					
Describe the diet you plan to provide and the source for wildlife food.					

ACCREDITED VETERINARIAN INFORMATION Applicant is required to find a New Mexico Accredited Veterinarian qualified to care for wildlife. **BUSINESS NAME VETERINARIANS NAME ADDRESS** CITY, ST, ZIP **TELEPHONE EMAIL**

CONTAINMENT & CONFINEMENT PLAN			
Describe the facilities where each live animal will be housed. Attach photographs or illustrations of each enclosure.			
LOCATION			
SIZE (width x height x depth)			
MATERIALS USED			
ENTRANCE (gate, door, lock)			
ROOF MATERIAL			
SHELTER & SHADE			
PRIVACY & PROTECTION			
OTHER DETAILS			

QUALIFICATIONS

Attach resumes or CV's for the applicant and each sub-permittee. Applicant must provide verifiable experience of at least 240 hours in handling, caring for and training live non-releasable wildlife of the same or similar species as those identified in the application. If this requirement cannot be met, an apprenticeship with a permitted individual or approved organization is required.

REFERENCES				
Include names and phone numbers of two people who can attest to your qualifications and purpose for this application.				
NAME		PHONE		
NAME		PHONE		
	e supplied from at least five separate and legitimate organizat ase list those five below and attach their letters to this applicat	ions or entities r	equesting wildlife related educational	
NAME		PHONE		
	CURRICULUI	М		
Provide a brief	summary of the program curriculum, attach a detailed educat	ional class or pro	ogram curriculum or lesson plan.	

RATIONALE & JUSTIFICATIONS					
		to provide a brief and concise rationale, do not leave any section blank. Insufficiency may result in the denial of Applicants must attach a separate document with detailed explanations for each section below.			
Purpose	Explain t	the purpose and goals of your educational program.			
	Fan				
Justification		any requested collection and retention of wildlife, demonstrate need for the take and necessity of requested umbers.			
Benefits of	project	Include how the State of New Mexico and its wildlife species benefit from your educational program. Benefits will be subject to Department review.			
Resources &	Resources & Availability Indicate if this project is under contract or supported by grants and provide information demonstrating that you can realistically provide required programs and humane care for these animals long-term.				

EDUCATIONAL PROGRAM APPLICATION AND RENEWAL USE OF PROTECTED WILDLIFE FOR EDUCATIONAL PURPOSES



NEW MEXICO DEPARTMENT OF GAME & FISH FIELD OPERATIONS DIVISION SPECIAL USE PERMITS PROGRAM P.O. BOX 25112 SANTA FE, NM 87504

> 505-476-8070 / Fax 505-476-8133 Email: DGF.Permits@state.nm.us

LEGAL CONFIRMATION

The information contained in this application and any attachments are true and complete to the best of my knowledge. Applicant and sub-permittee(s) agree to abide by the New Mexico Department of Game and Fish (NMDGF) laws and regulations and the "Conditions of Authorization" contained in the educational use permit issued for protected wildlife in New Mexico as requested in this application. Authorizations to conduct such activities can be revoked, suspended or amended by the NMDGF to protect wildlife or as the result of violations committed as a permittee or sub-permittee. For any new permittee or sub-permittee a resume or CV must be included with application.

APPLICANT SIGNATURE **QUALIFICATIONS** PRINTED NAME ORIGINAL SIGNATURE DATE **PREVIOUSLY** APPROVED? **YES** NO

SUBPERMITTEES SIGNATURES				
PRINTED NAME	ORIGINAL SIGNATURE	DATE	QUALIFICATIONS PREVIOUSLY APPROVED?	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	
			☐ YES ☐ NO	