

## Application for an Educational Activity Permit for The BNP

Name (Last, First, MI): \_\_\_Weeks, Stephen C.\_\_\_\_\_

Semester and year of planned use: \_\_\_Fall, 2009\_\_\_\_\_

Affiliation: \_\_\_The University of Akron\_\_\_\_\_

Email address: \_\_\_scw@uakron.edu\_\_\_\_\_

MailingAddress: \_\_\_Bio Dept, The University of Akron\_\_\_\_\_

Class(es) or Group(s) you will take on the preserve: \_\_\_Invertebrate Zoology class\_\_\_\_\_

Briefly describe the activity to be conducted on the BNP.

\_\_\_We will be destructively sampling invertebrates from 4 habitat types in the BNP: forest, stream (North Fork), pond (Round Pond) and wetland. We will be preserving specimens in ethanol for later identification in the lab. We attempt to only take single samples of each species from any one habitat, so the impact of this sampling has always been minimal. Our goal is to continue to produce a list of invert species found at the BNP.

How many students per visit do you anticipate? \_\_\_18\_\_\_\_\_.

On which "research areas" of the preserve will your activity occur? North Fork (near sled-ride hill), Round Pond, South Woods, and wetlands located at extreme southern section of BNP (near the Bridle Trail

Does your proposal involve areas that are not part of the designated research areas? \_\_\_No\_\_\_\_\_

(if yes, this permit will require approval from the Bath Trustees – this can only be sought four times a year, and so approval of your permit may take up to several months). Talk with the BNP Committee for more details.

What are the anticipated dates of your visit? (we understand this may be determined by weather-but please estimate when you will use the BNP) \_\_Sept 1, 3, 10, 15\_\_\_\_\_

Will the activity involve any destructive sampling/collecting ? Yes X No\_\_\_\_\_

If so, please explain how the material will be collected (including equipment), and an estimate of how much material will be collected: We will use dip nets, kick seine, forceps and sample bottles. In the past, we have ended up with 30-40 species and about 1-2 samples of each species.

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What is the potential impact of your activity on nature preserve?

We will be destructively sampling inverts, so there will be some removal of specimens. The other impact would be primarily small-scale disruptions caused by foot traffic to and from collection localities and disturbance during sampling itself, which in the past has been quite minimal.

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Have you looked over the web sites of the other research/activities being conducted at BNP?

Yes X No\_\_\_\_\_

Are there any potential conflicts of your activity with others at BNP? Yes \_\_\_\_\_ No X

Explain:\_\_\_\_\_

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**By requesting an education permit for work at the BNP, you must agree to the following terms:**

- Educators are responsible for obtaining the appropriate state or federal permits for the conduct of their activity on the BNP (e.g., when working with regulated species).
- Educators are responsible for removing all markers, etc. from their research plots when the research is completed.
- Educators must review all research projects being conducted at BNP and must defer to them when there is a conflict (e.g. if you want to conduct an activity in an area that is closed because of a research project, we will ask that you find another area within BNP for your activity).
- These permits are good for one semester only.
- Educators will file a report of usage, listing information such as: # user days on the BNP, a summary of results of the project(s), a list of data generated and contact information for those interested in the data, and a list of publications or other products resulting from the project(s).
- Educators must abide by the rules and regulations of the BNP in any and all conduct of activities at the BNP.

By signing the request for a BNP education permit below, I agree to the above terms and state that all of the above information is correct to the best of my knowledge. I also agree to amend my above permit request if my activity plans change such that they are no longer well represented in the information supplied in this permit request. If I fail to notify the BNP oversight committee of significant changes in my research, or if I do not follow the rules of the BNP, I realize that the BNP oversight committee can revoke my research permit, and disallow any further work by me, research or otherwise, at the BNP.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ 8-13-09 \_\_\_\_\_

Print Name: \_\_\_\_\_ Stephen C. Weeks \_\_\_\_\_

Approval:

Bath Township: \_\_\_\_\_ Date: \_\_\_\_\_

University of Akron: \_\_\_\_\_ Date: \_\_\_\_\_