



COOPERATIVE INSTITUTE FOR THE NORTH ATLANTIC REGION

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To: National Oceanic & Atmospheric Administration (NOAA)
Line Office (i.e. OAR/NMFS/NOS/NWS, etc.): _____
Program: _____
Attn: Program Manager: _____
Address: _____
Tel: _____ E-mail: _____

From: Don Anderson, Contact PI, Cooperative Institute for the North Atlantic Region (CINAR)
Woods Hole Oceanographic Institution MS 32, Woods Hole, MA 02543
Tel. 508-289-2351, E-mail: danderson@whoi.edu

FFO number: NOAA-OAR-CIPO-2026-XXXXX

Title of Proposal: _____

Principal Investigator(s): _____ Email: _____ Phone: _____

Address: _____

eRA User Name: _____ Period of Performance: _____

Institution Proposal #: _____

Funding: Please check one One-Year Project or Multi-Year Project

First Year Funds: Task II/III (Science Funding): \$ _____ Task I at 3.4 %: \$ _____ Total Year 1 Funding: \$ _____

Second Year Funds: Task II/III (Science Funding): \$ _____ Task I at 3.4 %: \$ _____ Total Year 2 Funding: \$ _____

Third Year Funds: Task II/III (Science Funding): \$ _____ Task I at 3.4 %: \$ _____ Total Year 3 Funding: \$ _____

Total of Request: Task II/III (Science Funding): \$ _____ Total Task I: \$ _____ Total Funding: \$ _____

Task II. Research activities usually require ongoing *direct collaboration* with NOAA scientists.
Task III. Research activities require *minimal collaboration* with NOAA scientists.

CINAR Theme: *Please select most appropriate theme*

- Theme I: Sustained Ocean Observations
- Theme II: Ecosystem Research, Observation, and Modeling
- Theme III: Stock Assessment Research
- Theme IV: Protected Species Research and Recovery
- Theme V: Ecosystem Based Fisheries Management

Please answer all questions

1. Is there a former DOC employee working for the CI host institution who represented or will represent the host institution before DOC or another Federal agency regarding this proposal?
 Yes No
2. Does this award include any sub award to a Minority Serving Institution? Yes No
3. Does the proposed award require any non-federal employees or sub awardees to have physical access to Federal premises for more than 180 days or to access a Federal information system?
 Yes No
4. Is PROGRAM INCOME anticipated being earned during performance of this project? Yes No
5. Will a VIDEO be created for public viewing be part of this project? Yes No
6. Will DOC/NOAA owned equipment be provided to any investigator for use outside a Federal location for this project?
 Yes No
7. Are any permits required to conduct this project? (If yes, please provide the name of the issuing agency and the permit number.)
 Yes No
8. Will this project involve research activities performed in the ocean (e.g., sample collection, equipment/instrument deployment, etc.) Yes No

DUNS #: 00-176-6682 Congressional District: 09 EIN #: 04-2105850
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