
 <p style="font-size: 1.2em; font-weight: bold; margin-top: 10px;">Subsistence Halibut Special Permits Application</p>	<p>U.S. Dept of Commerce/NOAA National Marine Fisheries Service Restricted Access Management P.O. Box 21668 Juneau, Alaska 99802-1668 Telephone: 1-800-304-4846 FAX: 907-586-7354</p>	
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**Block A - Type of Subsistence Halibut Special Permit Requested**

Please indicate the type of permit for which you are applying (please mark only one):

Community Harvest Permit     
  Ceremonial Permit     
  Educational Permit

Are you applying for a new permit or a renewal of an existing permit?     
  New       Renewal

If a Renewal, enter permit number

**Block B - Subsistence Halibut Community Harvest Permit**

1. Name of Alaska Native tribe or community

2. Community Halibut Permit Coordinator

Name (First, Middle, Last)

Mailing Address (Number, Street, City, State, Zip Code)      Daytime Telephone Number

**Block C - Subsistence Halibut Ceremonial Permit**

1. Name of Alaska Native tribe or community

2. Ceremonial Halibut Permit Coordinator

Name (First, Middle, Last)

Mailing Address (Number, Street, City, State, Zip Code)      Daytime Telephone Number

3. Describe occasion of cultural or ceremonial significance

<b>Block D - Subsistence Halibut Education Permit</b>	
1. Name of Alaska Native Tribe	
2. Educational Halibut Permit Instructor	
Name (First, Middle, Last)	Daytime Telephone Number
Mailing Address (Number, Street, City, State, Zip Code)	
3. Educational Institution or Organization	
Mailing Address (Number, Street, City, State, Zip Code)	Daytime Telephone Number
4. Course Description (add extra sheet if necessary)	
5. Demonstrate enrollment of qualified students	
6. Describe minimum attendance requirements	
7. Describe standards for the successful completion of the educational program	
8. Describe standards for successful completion of the course	
<p style="text-align: center;"><b><i>PUBLIC REPORTING BURDEN STATEMENT</i></b></p> <p>Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salveson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802-1668.</p> <p style="text-align: center;"><b><i>ADDITIONAL INFORMATION</i></b></p> <p>Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the Alaska Subsistence Halibut Program; 3) Federal law and regulations require and authorize NMFS to manage subsistence halibut programs in Alaska; 4) Submission of this information is mandatory for any tribe participating in subsistence fishing for Pacific halibut under the Ceremonial or Educational Permit Programs; 5) This information is used to monitor the subsistence halibut program under the Northern Pacific Halibut Act of 1982; 6) Responses to this information request are not confidential.</p>	