**Flight Operations and Safety Form**

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| **Operation Description** |
| Name |  |
| Department  |  |
| **Aircraft** |
| FAA Registration # of all units |  |
| UAS Image |  |
| **Mission** |
| Location (Include GPS coordinates) |  |
| Number of Participants |  |
| Mission Goal |  |
| Number of Flights |  |

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| **Flight Area** |

Please insert a clear picture outlining the area you wish to operate. If multiple locations, please provide a picture for each location.

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| **Safety Hazards and Mitigations** |
| **Hazard****Ex. Trees, People, Buildings** | **Mitigation****(Managing the Hazard, Ex. signage, additional spotters, etc. )** |
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| **Crew Information** |
| **Crew Name** | **Position** | **Contact Information** | **Credentials** |
|  | Pilot In Command |  |  |
|  | Visual Observer |  |  |
|  | (Other, Specify) |  |  |

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| Please Attach Any Additional Requested Documentation |

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| I verify that this information is correct to the best of my knowledge and that I will follow NMSU Policy in regards to UAS operations to the best of my ability.  |
| Name: | Signature: |
| Date: |  |