

UAV/UAS FLIGHT PLAN REGISTRATION

IMPORTANT: Each flight date must include a map of the planned flight path



A. Owner Information

Name	
Address	
City, State ZIP	
Phone	
Email	

FAA Pilot Number:	
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B. UAV (Drone) Information

UAV Make/Model/Color	
FAA Registration #:	
Date of Flight	
Flight Start Time	
Flight End Time	
Campus Safety Reg #	<i>Assigned by Campus Safety</i>
Campus Safety Official	

Campus (school) Official Approval By:

Name: _____ Date: _____

Additional Flight Dates (90 day maximum):

Describe location of the area you will be operating your UAV. Be sure to include the (a) Campus, (b) Area take off, and the (c) Area(s) that you will be flying. Attach map for each flight & planned route.

Type here

C. Cable Airport Authorization

Provide a copy of written authorization (email, etc). If no written approval, provide name and number of person who approved this UAV Flight.

Name: _____

Phone: _____

Email: _____

Email Attached: Y / N

*****This Section Completed by Campus Safety*****

All flight plans must be assigned a registration number, and be routed to the following. Denied flight applications are to be sent to the pilot and campus.

Approval routed to Campus: Y / N	Approval routed to Pilot: Y / N
Approval routed to Dispatch: Y / N	If Denied, was Pilot/Applicant & campus notified? Y / N

D. Pilot/Operator Declaration

I understand that I am responsible to obey all regulations as outlined by FAA UAS/UAV Rule (Part 107); all policies of the campus(es) have been approved for; and the regulations and policies of The Claremont Colleges. I also understand that (a) approval is subject to change, and (b) if ordered to land my UAV by Campus Safety or any authorized official of any campus, I shall do so immediately.

Pilot Signature	Date
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Print, Scan and Email to: Dispatch@claremont.edu