

Cooperative Recovery Initiative: FY16 Proposal Cover Sheet

Project title:

Project summary (100 words or less):

Total amount requested:

Lead region:

Other participating Regions:

National Wildlife Refuge(s) involved (please list):

Are private lands involved? y/n:

All FWS programs involved:

Additional comments:

Project Contacts:

Project Biologist, Ecological Services (*name, title, station, phone, email*)

Project Biologist, NWRS (*name, title, station, phone, email*)

Other Contacts, if necessary

Signatures

Ecological Services Field Supervisor

Date

Refuge Manager

Date

Approval of Assistant Regional Directors

Assistant Regional Director, Ecological Services

Date

Regional Chief, Refuges

Date

Additional ARD/Chief signatures as needed (e.g. projects that do not impact migratory birds would not require the signature of the ARD/Chief for Migratory Birds).

Assistant Regional Director, _____

Date

Assistant Regional Director, _____

Date
