

Chief Scientist:		Ph:	MPC:
Event #(s):		E-mail:	Date:
Cruise #:			
Planning Services			
	SIP process met expectations?		
	RSP helpful and timely?		
	POC responsive?		
Medical Services			
	Kits sent out on time?		
	Questions answered?		

Cruise #:**Date:****Travel Services**

TRW available and understandable?

Ticketing completed easily?

Meet and assist service met requirements?

Equipment Availability**Requested** equipment available?

Damaged?

Late?

ECW gear in good condition?

Cruise #:		
Date:		
	<p>Lab Space Adequate? (electrical needs, bench space, water, etc.)</p> <p>Remote Sensing support needs met? (QFax, Terascan, etc.)</p>	
Hotel Services		
	<p>Cabins clean and neat?</p> <p>Linens clean and in good condition?</p> <p>Food quality and variety was good?</p>	

Cruise #:

Date:

Personnel Review

ECO

RPSC

Safe Practices

Please give us your feedback about safety onboard this USAP vessel. Please give as much detail as possible.

Cruise #:**Date:****Research Objectives**

All accomplished?
If not, please
explain (weather,
ice, equipment,
personnel, etc.).

Future Cruises

If returning for
another
cruise, are there
any additional
equipment or
support needs your
group anticipates?

Anything you would
like to see
changed?

Cruise #:

Date:

Other Issues

Diving, Zodiac, E-mail support, interactions with stations, etc.).

Cruise #:

Date:

Additional Comments/Overflow: