



Unit for Environmental Sciences and Management

METSI RESEARCH PROJECT APPLICATION FORM

Please complete the form electronically and submit to clarissaminaar@gmail.com. Research at METSI may only commence once this form has been approved by the METSI committee and the Research Agreement form is signed by both parties.

1. Project title: [text box]

2. Contact details

2.1. Senior researcher contact details

2.1.1. Title: [text box] Initials: [text box] Surname: [text box]
2.1.2. Position: [text box]
2.1.3. Institution: [text box]
2.1.4. Department: [text box]
2.1.5. Campus: [text box]
2.1.6. Contact numbers: Office: [text box] Mobile: [text box]
2.1.7. Email address: [text box]
2.1.8. Identity number (Passport number): [text box]

2.2. Co-workers contact details (does not include students under training)

2.2.1. Title: [text box] Initials: [text box] Surname: [text box]
2.2.2. Position: [text box]
2.2.3. Institution: [text box]
2.2.4. Department: [text box]
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(To add more Co-workers, see the end of the document)

3. Research keywords (max 5):

4. Summary of proposed research

4.1. Reason for selecting this facility for the proposed research (Max 200 words)

4.2. Is the proposed research part of a larger project that involves multiple facilities, or is METSI the sole facility on which research will be conducted? (If multiple facilities are involved please provide a description)

4.3. Rationale (Max 300 words)

4.4. Objectives (Max 300 words)

4.5. Work procedures and methods under the following headings

4.5.1. Experimental infrastructure, resources and facilities to be used (Indicate with an **X**)

- 4.5.1.1. Mesocosms
- 4.5.1.2. Greenhouse
- 4.5.1.3. Weather station
- 4.5.1.4. Logger room
- 4.5.1.5. Container
- 4.5.1.6. Borehole
- 4.5.1.7. Other

Please specify:

4.5.2. Will the proposed research contribute to existing long-term research infrastructure? (Indicate with an **X**)

Yes No
If yes, please specify

4.5.3. Please provide the GPS coordinates of research experiments for this study

4.5.4. Please indicate the location of research experiments at the facility (indicate number/s, e.g. 1b, 2)



Vegetation zones

- 1. (a, b, c) Dolomite grassland
- 2. Eucalypt exotic woodland
- 3. Abandoned field
- 4. Floodplain
- 5. (a, b) Populus exotic woodland
- 6. (a, b) Wetland-terrestrial ecotone
- 7. (a, b) Phragmites wetland

Site boundary and vegetation types: [Minnebron - Google My Maps](#)

METSI coordinates: [26°29'26.4"S 27°07'56.9"E - Google Maps](#)

We strive to maintain good relationships with the land-owners surrounding METSI. Please take note that any fieldwork planned outside of the METSI borders should be discussed with Mr Lieb Venter and arranged with the affected land-owners. This includes visits to the source of the Gerhard Minnebron river (also called "The Eye").

4.5.5. Will any part of the research fieldwork be conducted outside of the METSI borders? If so, please specify.

4.5.6. List of study subjects (i.e. animals / plants / microbes etc.)

4.5.7. Should the research activities require specialized, contracted labor (i.e. other than ordinary physical labor that will be done by the research team), please specify.

4.5.8. Sampling / experimental protocol

4.5.8.1. Sample size (area / no of plots, transects)

4.5.8.2. Quantity of material to be collected

4.5.8.3. Frequency of collection

4.5.8.4. Will any equipment be deployed in the field? If yes, please specify

4.5.8.5. Where will voucher specimens will be housed?

4.5.9. Waste removal

4.5.9.1. The researcher accepts the responsibility of removing all waste generated by the proposed project. (Indicate with an **X**)

Yes No

4.5.9.2. Will the proposed research activities generate any hazardous **biological** waste? (Indicate with an **X**)

Yes No

If Yes, please provide details on the proposed removal measures according to the health and safety requirements and waste disposal protocol:

4.5.9.3. Will the proposed research activities generate any hazardous **chemical** waste? (Indicate with an **X**)

Yes No

If Yes, please provide details on the proposed removal measures according to the health and safety requirements and waste disposal protocol:

4.5.10. Time-line

4.5.10.1. Please state full period of research and provide a monthly time-line for the duration of specific activities at the facility..

4.5.11. Ethical clearance

Note: collection procedure for vertebrates and higher order invertebrates (which require ethics approval) as described in section 3 of SANS (South African National Standard) 10386:2008.

Please provide an ethical clearance number or attach any evidence that ethical clearance has been submitted.

4.5.11.1. If chemical, please detail drugs, dosage and administration methods

4.6. Expected outcomes (Max 200 words)

4.7. Accommodation required

(Please note: The unit can accommodate 8 persons and consists of two rooms, each with four beds) (Indicate with an **X**)

Yes No

If Yes, please indicate:

Number of nights:

Number of people:

Dates:

5. Strategic, Support and Logistics

5.1. Who is the funding provider of the project?

5.2. Will any qualification/s be obtained from the study? (Indicate with an **X**)

Yes No

5.2.1. If Yes, please indicate with an **X**:

Hons

MSc

PhD

Other

Please specify:

5.2.2. Expected date of completion

5.2.3. Will the proposed research generate any publications / presentations?

5.2.4. In the event that publications / presentations are generated from the proposed research, do you agree to make these research outputs available to the UESM and that such outputs may be uploaded to the METSI website?

5.3. How will the study benefit interdisciplinary objectives of the UESM? (Max 100 words)

5.4. Any other support and assistance desired from the UESM? (Max 200 words)
E.g. Access to the facility

5.5. Please specify any specific management requirements applicable to this proposed research, e.g. fire treatments, bush clearance, etc.

6. Data sharing policy

6.1. Please indicate the type of data that will be made available to the UESM

6.2. Date when data and metadata will be made available to the UESM

6.3. Do you have access to historical data? If Yes, please provide details

6.4. Will you be able to make the abovementioned historical data available to the UESM?

7. Accompanying documents and indemnification

I have read and understand the Rules and Regulations document (Indicate with an **X**)

Yes No

I hereby agree to complete the Research Agreement document after approval of the Standard Research Application document and acknowledge that research at METSI will only be allowed to commence once the Research agreement document has been signed by both parties involved (Indicate with an **X**)

Yes No

I hereby agree to complete an annual progress report form. (Indicate with an **X**)

Yes No

8. Signature

By signing this document:

- the researcher agrees that all the information contained in this document is correct to the best of his/her knowledge.
- the researcher indemnifies METSI, its committee, directors, employees and agents from any loss, damage or harm to the property, possession or health of the researcher and his/her assistance or team. The researcher agrees that the research will be conducted at own risk.
- the researcher agrees that he/she shall be liable for any loss or damage incurred by METSI resulting from a negligent act or omission by the researcher and his assistance or team while conducting research at the facility.

Senior Researcher

Date

9. Additional Co-workers

9.1. Co-workers contact details (includes students)

9.1.1. Title:	<input type="text"/>	Initials:	<input type="text"/>	Surname:	<input type="text"/>
9.1.2. Position:	<input type="text"/>				
9.1.3. Institution:	<input type="text"/>				
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