



Unmanned Aerial Vehicles (UAV) Request Form

This UAV Request Form must be completed and submitted to EHSRM@utrgv.edu for review and approval by the UAV Review Group (UAVRG) prior to any UAV operations on university property or at any university sponsored event. University faculty, staff, graduate associates, students, or others conducting operations on behalf of the university must submit this document not less than two (2) weeks in advance of flight operations. Individuals who are not affiliated with the university or who are not conducting university sponsored operations must submit this form no less than three (3) weeks in advance of flight operations. The Requestor will receive a response within ten (10) working days of request receipt. Prior to submission of this form, the Requestor must review the Unmanned Aerial Vehicles policy ADM 10-905. **Any omission of information requested in this form may result in a delay of processing.**

SECTION 1: REQUESTOR INFORMATION

Applicant Full Name: First _____ M.I. _____ Last _____

Current Affiliation with University: Faculty Staff Graduate Associate Student Non-University Affiliation

UTRGV Department or Sponsor/Organization: _____

Mailing Address: _____

Contact Phone: _____ **Email Address:** _____

SECTION 2: PURPOSE OF UAV REQUEST / PROPOSED ACTIVITY

Provide full details of flight purpose (education, research, promotional, etc.) Depending on your intended use and activities associated with the use of your UAV, there may be other university approvals required before you can operate your UAV on university property or at university events. For example, any activities that involve videography, photography or recording must first be approved through the Office of the President and may be subject to an Export Review.

Specific Location of Activity: _____

Date(s) of UAV Activity: _____ **Starting Time:** _____ **Ending Time:** _____

Will photographs or videos be taken during flight? (Check where applicable)

Photographs

Videos

SECTION 3: UAV DESCRIPTION

Year /Make/Type/Model of UAV: Type: _____ Make: _____ Model: _____

What is the weight of the drone? _____ (lbs.)

What height do you plan on flying the drone? _____ (ft)

Is the UAV equipped with Geofencing? Yes No

Has the Drone been registered with the [Federal Aviation Administration \(FAA\)](#)? Yes No

SECTION 4: PILOT INFORMATION

Drone Pilot: First _____ M.I. _____ Last: _____

Has the Pilot taken and passed The Recreational UAS Safety Test (TRUST) Yes No

I have attached a Certificate of Waiver (non UTRGV affiliated entities) and/or other relevant documentation for this request.

Signature: _____ Date: _____

By signing above, the individual/entity submitting this request agrees to and will abide by all university policies governing the use of Unmanned Aerial Vehicles on or over university property or sponsored event. A copy of the approved UAV Request Form must be in possession of the operator at all times during the activity and must be presented to any university official or representative with control or jurisdiction over the activity, upon request. The university reserves the right to request additional documentation as a condition of approval and operation. In addition, any operator violating any portion of the University Unmanned Aerial Vehicles (UAV) policy, will be held accountable for their actions.

SECTION 5: UAV ADVISORY GROUP RESPONSE

UAV Advisory Group comments or requirements for operation are listed below and must be observed. If not approved, a summary of the decision is outlined.

Request Approved Yes No

Signature, UAV Advisory Group Chair

Date