

**EDUCATIONAL PROGRAM APPLICATION AND RENEWAL  
USE OF PROTECTED WILDLIFE FOR EDUCATIONAL PURPOSES**



NEW MEXICO DEPARTMENT OF GAME & FISH  
LE FIELD OPERATIONS DIVISION  
SPECIAL USE PERMITS PROGRAM  
ONE WILDLIFE WAY  
SANTA FE, NM 87507  
Email: [DMF.Permits@dmf.nm.gov](mailto:DMF.Permits@dmf.nm.gov)

**Permit Fees:**

Application.....\$15.00  
Renewal.....\$15.00  
Amendment.....\$15.00

**FOR DEPT. USE ONLY**

Payment Type/# \_\_\_\_\_  
Amount \$ \_\_\_\_\_  
Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Initials \_\_\_\_\_

Allow a processing time up to six weeks, applicants must ensure completeness of application. Missing documentation will delay the process and applications will not be reviewed until all the requirements are met. Additional details may be requested. If approved, you will be issued a permit that stipulates the specific activities you will be authorized to conduct. A valid permit must be issued before conducting activities and approval is not guaranteed. Annual reports from the previous year are required prior to permit renewal.

**APPLICATION**                       **RENEWAL**                       **AMENDMENT**

<b>NAME</b>		<b>EMAIL</b>	
<b>BUSINESS NAME</b>		<b>WEBSITE</b>	
<b>ADDRESS</b> (mailing)		<b>ADDRESS</b>	
<b>CITY, STATE, ZIP</b>		(physical)	
<b>TELEPHONE</b>		<b>CELL</b>	
<b>DATE OF BIRTH</b>		<b>FAX</b>	

<b>PERMIT No.</b> (if applicable)		<b>LAST YEAR OF PERMIT ISSUANCE</b>	
<b>REQUESTED TIME FRAME</b>	<b>START DATE</b>	<b>END DATE</b>	

**FEE EXEMPTION**

Applicants are exempt from the required annual fee when activities are part of your official duties as a Federal or New Mexico state employee or local agency employee, or a designated cooperator with the NMDGF. If you are not exempt, include a check or call with credit card. If exempt, provide a brief statement of explanation below:

**FEDERAL PERMIT REQUIREMENTS**

If requested activities involve federally protected species, have you received a federal scientific permit or banding permit?

<input type="checkbox"/> <b>NO</b> , not required	<input type="checkbox"/> <b>Pending Approval</b>	<input type="checkbox"/> <b>YES</b> , permit type/number	Attach a copy of permit
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## WILDLIFE REQUESTED

Provide a detailed list of protected wildlife for which you are requesting take and possession (see regulation 19.35.6 NMAC for definitions of “take” and “protected wildlife”). Attach additional pages if necessary.

Common Name	Scientific Name	Acquiring From <small>(include name and permit number/type)</small>	Unique Identification <small>(Microchip # or other)</small>

## SALVAGE AUTHORIZATION

NEW MEXICO RESIDENTS		NON-RESIDENTS	
<input type="checkbox"/>	<b>BIRDS</b>	<input type="checkbox"/>	<b>BIRDS</b>
<input type="checkbox"/>	<b>FURBEARER</b>	<input type="checkbox"/>	<b>FURBEARER</b>
<input type="checkbox"/>	<b>GAME</b>	<input type="checkbox"/>	<b>GAME</b>
<input type="checkbox"/>	<b>REPTILES Threatened/Endangered</b>	<input type="checkbox"/>	<b>REPTILES</b>
<input type="checkbox"/>	<b>AMPHIBIANS Threatened/Endangered</b>	<input type="checkbox"/>	<b>AMPHIBIANS</b>
<input type="checkbox"/>	<b>MAMMALS Threatened/Endangered</b>	<input type="checkbox"/>	<b>NON-GAME MAMMALS</b>

## JUSTIFICATION OF SALVAGE

## DISPOSITION OF WILDLIFE

e.g. Live wildlife and/or wildlife parts for educational programs. Include final dispositions of unintentional casualties, in what institution will the wildlife be deposited, if no specific preference is listed, final disposition will be to the Museum of Southwestern Biology, University of New Mexico, Albuquerque, NM.

## DIETS AND FOOD SOURCE

Describe the diet you plan to provide and the source for wildlife food.

## ACCREDITED VETERINARIAN INFORMATION

Applicant is required to find a New Mexico Accredited Veterinarian qualified to care for wildlife.

**BUSINESS NAME**

**VETERINARIANS NAME**

**ADDRESS**

**CITY, ST, ZIP**

**TELEPHONE**

**EMAIL**

## CONTAINMENT & CONFINEMENT PLAN

Describe the facilities where each live animal will be housed. Attach photographs or illustrations of each enclosure.

**LOCATION**

**SIZE** (width x height x depth)

**MATERIALS USED**

**ENTRANCE** (gate, door, lock)

**ROOF MATERIAL**

**SHELTER & SHADE**

**PRIVACY & PROTECTION**

**OTHER DETAILS**

## QUALIFICATIONS

Attach resumes or CV's for the applicant and each sub-permittee. Applicant must provide verifiable experience of at least 240 hours in handling, caring for and training live non-releasable wildlife of the same or similar species as those identified in the application. If this requirement cannot be met, an apprenticeship with a permitted individual or approved organization is required.

## REFERENCES

Include names and phone numbers of two people who can attest to your qualifications and purpose for this application.

<b>NAME</b>		<b>PHONE</b>	
<b>NAME</b>		<b>PHONE</b>	

## INTERESTED PARTIES

Letters must be supplied from at least five separate and legitimate organizations or entities requesting wildlife related educational programs, please list those five below and attach their letters to this application.

<b>NAME</b>		<b>PHONE</b>	
<b>NAME</b>		<b>PHONE</b>	
<b>NAME</b>		<b>PHONE</b>	
<b>NAME</b>		<b>PHONE</b>	
<b>NAME</b>		<b>PHONE</b>	

## CURRICULUM

Provide a brief summary of the program curriculum, attach a detailed educational class or program curriculum or lesson plan.

## RATIONALE & JUSTIFICATIONS

This section is for you to provide a brief and concise rationale, do not leave any section blank. Insufficiency may result in the denial of a permit application. Applicants must attach a separate document with detailed explanations for each section below.

<b>Purpose</b>	Explain the purpose and goals of your educational program.
<b>Justification</b>	For any requested collection and retention of wildlife, demonstrate need for the take and necessity of requested numbers.
<b>Benefits of project</b>	Include how the State of New Mexico and its wildlife species benefit from your educational program. Benefits will be subject to Department review.
<b>Resources &amp; Availability</b>	Indicate if this project is under contract or supported by grants and provide information demonstrating that you can realistically provide required programs and humane care for these animals long-term.

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**LEGAL CONFIRMATION**

The information contained in this application and any attachments are true and complete to the best of my knowledge. Applicant and sub-permittee(s) agree to abide by the New Mexico Department of Game and Fish (NMDGF) laws and regulations and the "Conditions of Authorization" contained in the educational use permit issued for protected wildlife in New Mexico as requested in this application. Authorizations to conduct such activities can be revoked, suspended or amended by the NMDGF to protect wildlife or as the result of violations committed as a permittee or sub-permittee. For any new permittee or sub-permittee a resume or CV must be included with application.

**APPLICANT SIGNATURE**

PRINTED NAME	ORIGINAL SIGNATURE	DATE	QUALIFICATIONS PREVIOUSLY APPROVED?
			<input type="checkbox"/> YES <input type="checkbox"/> NO

**SUBPERMITTEES SIGNATURES**

PRINTED NAME	ORIGINAL SIGNATURE	DATE	QUALIFICATIONS PREVIOUSLY APPROVED?
			<input type="checkbox"/> YES <input type="checkbox"/> NO
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