	Office of Risk Management							
Unmanne	ed Aircraft Systems (UAS) Re	quest Form (Applicatio	n for UAS O	perations)				
approval b University s behalf of th	Request Form must be completely the UAS Approval Committee sponsored event. University faculty the University must submit this document of the University must submit the University must be used to the U	(UAC) prior to any UAS y, staff, graduate associate ment not less than two (2) w	operations o s, students, or veeks in advan	n University property or at any others conducting operations or ce of flight operations.				
submit this within 10 w	form not less than three (3) weeks orking days of request receipt. Priostems policy ODU UAS POLICY UR	in advance of flight operation to submission of this form	ons. The Requ , the Requesto	estor will receive a UAC response or must review the Unmanned				
SECTION	N 1: REQUESTOR INFORMATION	NC						
Applicant Fu	II Name: First	M.I	Last					
Affiliation:	University (Current University Face	ulty, Staff, Graduate Associate	or Student)	Non-University				
ODU Departi	ment or Organization:							
Address:								
		Email Address:						

Depending on your intended use and activities associated with the use of your UAS, there may be other university approvals required before you can operate your UAS 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 Strategic Communications & Marketing.

videograpny, photograpny or re	cording mus	St HIST DE	approved through the Office of Stra	negic Communications & Man	æung.
-					
Date(s) of UAS Activity: —————			Starting Time:	Ending Time:	
SECTION 3: UAS DESC	RIPTION	T.E.	5 · 中国 5 (2) · 中国 5 (2) · 中国 5 (3)		1 1 1 1 1 1 1
Type/Model of UAS:					
Weight/Dimensions: Power Source/Serial #:					
Previous Request Approved Yes No If Yes, Date of Previous Approval:					

No If Yes, Registration Number: __

Yes 🗌

UAS Registered with FAA

Photographs taken during flight	Yes□	No 🗌	Video recorded during flight	Yes 🗌	No 🔲					
Equipped with Geo-fencing	Yes	No	Operating under a COA/333	Yes 🗌	No 🗌					
I have attached a Certificate of Waiver or Authorization (COA), and/or other relevant documentation for this request.										
Signature			Date							
By signing above, the individual/entity submitting this form warrants they have read the ODU UAS Policy and agrees to and will abide by all university policies governing the use of Unmanned Aircraft Systems on or over university property or sponsored event. A copy of the approved UAS 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 Aircraft Systems (UAS) Policy, will be held accountable for their actions.										
SECTION 4: UAS APPROVAL COMMITTEE OR DESIGNEE RESPONSE										
Request Approved	Yes	No 🗌								
UAS Approval Committee comments or requirements for operation are listed below and must be observed. If not approved, a summary of the decision is outlined										
ODU Official approving this request:										
Signature:			/ Date:/	/						