GODAR-WESTPAC (FORM1)

Questionnaire for Inventory of Oceanographic Research Data

Please write down by **English block letters** and send this to the GODAR-WESTPAC project office located at Japan Oceanographic Data Center through the nearby National Oceanographic Data Center, or directly;

Japan Oceanographic Data Center

5-3-1, Tsukiji, Chuo-ku, Tokyo 104-0045, Japan Tel: +81-3-3541-7588, Fax: +81-3-3545-2885 http://www.jodc.go.jp/, E-mail: mail@jodc.go.jp

The digital form of this questionnaire is available on the web page of the project office. The information gathered by the questionnaire will be publicized at the web page of the project office.

INFORMATION OF DATA HOLDER	
NAME:	
POSITION:	
ORGANIZATION :	
ADDRESS:	
TEL:	FAX:
E-MAIL:	
DATA INFORMATION	
OBSERVING ORGANIZATION :	
TITLE OF DATA SET:	
TYPE OF OBSERVATION (such as Bottle, CTD, Tidal Obs. etc.):	
COVERAGE AREA :	
OBSERVATION PERIOD :	
RECORDING MEDIA:	
DATA VOLUME (QUANTITY) :	
OUTLINE OF DATA :	
CONDITION FOR DATA USE :	
☐ Possibly offer to GODAR-WESTPAC	
☐ Only direct provide from the data holder ☐ Other ()

Instruction to fill in the FORM1

Questionnaire for Inventory of Oceanographic Research Data

Please inform us about the oceanographic research data which you observed or have hold.

The collected information by this questionnaire will be publicized at the web page of the project office with expecting to support data exchange among researchers. Note that this questionnaire doesn't force you to submit your data to the project office.

INFORMATION OF DATA HOLDER	
NAME	The name of the contact person for the data
POSITION	Section or division name of the contact person for the data
ORGANIZATION	The name of the organization to which the contact person belongs
ADDRESS	Post-mail address of the contact person for the data
TEL	Telephone number of the contact person for the data
FAX	Facsimile number of the contact person for the data
E-MAIL	E-mail address of the contact person for the data
DATA INFORMATION	
OBSERVING ORGANIZATION	The name of the organization which carried out the observation.
	* The data holder sometimes does not belong to the organization which
	carried out the observation.
TITLE OF DATA SET	Please write down the title of data set if there is, such as research cruise
	KH-99-1 etc.
TYPE OF OBSERVATION	such as Bottle, CTD, Tidal Observation, XBT/MBT etc.
COVERAGE AREA	Coverage area of the dataset indicated by Lat/Long or area name such as
	South China Sea, South off the coast etc.
OBSERVATION PERIOD	Observation period of the data
RECORDING MEDIA	such as Magnet Tape, Floppy Disk, CD-ROM, Field Note, etc.
DATA VOLUME (QUANTITY)	Such as Byte, Sheet, Page etc.
OUTLINE OF DATA	Please describe the summary of data set, such as object of observation and
	project name etc.
CONDITION FOR DATA USE	Please check ✓ mark into an appropriate box according to your data
	availability. If you have a specific policy, please describe it.
	Possibly offer to GODAR-WESTPAC
	Only direct provide from the data holder
	Other (