



## Instruction to fill in the FORM2

### Questionnaire for Oceanographic Research Organization

Please inform us about your organization. This information is useful for other researchers and research organizations to cooperate on ocean research. The collected information by this questionnaire will be publicized at the web page of the project office.

ORGANIZATION NAME	Organization name
SHORT NAME	Acronym or abbreviation of the organization
ADDRESS	Post-mail address of the organization
TEL	Telephone number of the organization
FAX	Facsimile number of the organization
E-MAIL	E-mail address of the organization
HOME PAGE	URL of the organization
ESTABLISHED YEAR	The year when the organization was established
NAME OF HEAD	Personal name of the head of organization
SUMMARY OF ACTIVITY	Please brief activities of the organization
RESEARCH AREA	Please select one or more your research area from following area; Physical Oceanography, Chemical Oceanography, Marine Pollution, Biology and Fisheries, Meteorology, Geology and Geophysics, Other
NUMBER OF STAFF	Total number of staff in the organization with its breakdown, researcher, technical staff, office worker, and other.