



**California Department of Fish and Wildlife**  
**Authorization to Transport and Rear Eggs and Fish for**  
**Classroom Aquarium Education Projects (CAEP)**

Pursuant to Fish and Game Code Sections 6400, 711.7, 1802 and 2081(a)



Each aquarium must have an individual approved authorization form  
 Please see page 2 for additional information and conditions for this authorization form

<b>Application – Request for Eggs</b>	<p>Applicant name: _____</p> <p>E-mail: _____</p> <p>School Name: _____</p> <p>School mailing address: _____</p> <p>City: _____ Zip: _____</p> <p>School physical address (if different than mailing): _____</p> <p>City: _____ Zip: _____</p> <p>School District: _____</p> <p>School Phone: _____ School Fax: _____</p> <p>Cell or Alternate Phone: _____</p> <p>Sponsor Organization: _____</p> <p>Your sponsor contact: _____ Sponsor phone #(s): _____</p> <p>Sponsor contact email address: _____</p> <p>I have discussed this year's project with the above sponsor contact: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Species requested: <input type="checkbox"/> Rainbow Trout <input type="checkbox"/> Chinook Salmon <input type="checkbox"/> Steelhead Trout <input type="checkbox"/> Other (specify) _____</p> <p>Size of aquarium to be used: _____ gallons</p> <p>Month and year the eggs are wanted: _____ (if known)</p> <p>Proposed release location: Water body _____ Site _____ (e.g. Kings River, Winton Park)</p> <p>Alternate release location: Water body _____ Site _____ (optional)</p> <p>Alternate release location: Water body _____ Site _____ (optional)</p> <p><b><i>I have read and agree to the conditions on page 2 of this application</i></b></p> <p><b><i>Applicant's signature</i></b> : _____ <b><i>Date</i></b>: _____</p> <p><b><i>Supervisor's signature</i></b> : _____ <b><i>Date</i></b>: _____</p>								
<b>For CDFW Use Application Approval</b>	<p><input type="checkbox"/> The above application is approved</p> <p><input type="checkbox"/> Application approved as amended: _____</p> <p>Egg delivery date: _____</p> <p>Fish must be released before: _____</p> <p>CDFW Approving Signature: _____</p> <p>CDFW Printed Name and Title: _____</p> <p>Date approved: _____</p> <table border="1" style="float:right; margin-top: 20px;"> <tr><td># of eggs _____</td></tr> <tr><td><input type="checkbox"/> CHIN - _____</td></tr> <tr><td><input type="checkbox"/> COHO - _____</td></tr> <tr><td><input type="checkbox"/> CT - _____</td></tr> <tr><td><input type="checkbox"/> KOK - _____</td></tr> <tr><td><input type="checkbox"/> RT - _____</td></tr> <tr><td><input type="checkbox"/> SH - _____</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> </table>	# of eggs _____	<input type="checkbox"/> CHIN - _____	<input type="checkbox"/> COHO - _____	<input type="checkbox"/> CT - _____	<input type="checkbox"/> KOK - _____	<input type="checkbox"/> RT - _____	<input type="checkbox"/> SH - _____	<input type="checkbox"/> Other _____
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<b>Release summary</b>	<p><b><i>This section must be completely filled out and this permit shall be returned to the CDFW coordinator serving your county within 14 days of fish release, see page 2 for address</i></b></p> <p>Date fish were released: _____ Or date last fish died: _____</p> <p>Release location: Water body _____ Site _____</p> <p>Number of fry released: _____ Grade level(s) of students involved: _____</p> <p>Total number of students involved in class: _____ on field trip: _____</p> <p>Total number of hours teaching/facilitating CAEProgram: _____</p> <p>Permittee's signature: _____ Date: _____</p>								

**Applicant** - CDFW certified teacher or person responsible for the rearing of the fish or lead if several people are participating.

**Sponsor Organization** - Provider of assistance to the applicant (e.g. fly fishing club, non-profit organization)

**Application** - This 772 form is an application when first obtained by participant, a request for eggs.

**Permit/permittee** - Once this 772 application is approved by CDFW it becomes a permit for possessing eggs and fish and for the placing of those fish into waters of the State, at those authorized locations. Once approved applicant becomes the permittee.

**The following are the requirements:**

1. Only the applicant on this form is authorized to acquire and incubate the eggs or fish.
2. No eggs or fish acquired may be possessed, transferred, released or otherwise disposed of except as authorized by this form. Fish shall be released only at the location(s) authorized on the front of this form.

**A violation of the above requirements will result in immediate and permanent dismissal from the program.**

**The permitted applicant agrees to the following conditions:**

1. Permit - This permit shall remain with the eggs or fish at all times. The permit must be posted in a visible location on or next to the incubation unit and accompany the eggs and fish during transport.
2. After release - The summary section of this permit shall be filled out and the permit returned within 14 days upon release of fish or after the last fish dies.
3. Aquarium - Use a sterilized aquarium dedicated for CAEP fish. No other animals or plants allowed in aquarium at any time.
4. Rocks - Use uncoated gravel sanitized according to CDFW protocols. Do not collect materials such as sticks or plants from a stream or lake for use in CAEP aquarium.
5. Water - Use non-chlorinated water. Do not use distilled water, stream or lake water. Do not add chemicals or medication.
6. Eggs and fish – eggs and fish shall remain the property of the State and decisions on final disposition remain solely with CDFW. Do NOT release deformed or diseased fish, contact CDFW coordinator for instructions.
7. Permittee - teacher will devote a minimum of 10 hours facilitating the CAEP project; this includes equipment preparation and maintenance, teaching time, care of fish, and fish release (and excludes program training workshop).

**The following require CDFW approval:**

1. Changing the release location or any changes after application is approved
2. Holding fish beyond the approved release date.

**A violation of the above conditions or failure to seek necessary approval may result in de-certification from the program.**

Location the aquarium will operate:	Contact the CDFW CAEP Coordinator:		Mail to CDFW Regional Office:	
Del Norte, Humboldt counties	Christine Ramsey (707) 725-1027 <a href="mailto:R1CAEP@wildlife.ca.gov">R1CAEP@wildlife.ca.gov</a>		CDFW, Northern Coastal Region Attn: CAEP 1455 Sandy Prairie Ct, Suite J Fortuna, CA 95540	
Lassen, Modoc, Shasta, Siskiyou, Tehama and Trinity counties	Monty Currier (530) 225-2368 <a href="mailto:R1CAEP@wildlife.ca.gov">R1CAEP@wildlife.ca.gov</a>		CDFW, Northern Inland Region Attn: CAEP 601 Locust Street Redding, CA 96001	
Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Nevada, Placer, Plumas, Sacramento, San Joaquin, Sierra, Sutter, Yolo and Yuba counties	Richard Munoz (916) 358-1644 <a href="mailto:R2CAEP@wildlife.ca.gov">R2CAEP@wildlife.ca.gov</a>		CDFW, North Central Region Attn: CAEP 1701 Nimbus Road Rancho Cordova, CA 95670	
Alameda, Contra Costa, Lake, Marin, Mendocino, Napa, Sacramento, San Mateo, Santa Clara, Santa Cruz, San Francisco, San Joaquin, Solano, Sonoma, and Yolo counties	Ethan Rotman (415) 999-5924 <a href="mailto:R3CAEP@wildlife.ca.gov">R3CAEP@wildlife.ca.gov</a>		CDFW, Bay Delta Region Attn: CAEP 2825 Cordelia Rd., Suite 100 Fairfield, CA 94534	
Fresno, Kern, Kings, Madera, Mariposa, Merced, Monterey, San Benito, San Luis Obispo, Stanislaus, Tulare and Tuolumne counties	<b>For Salmon:</b> Gail Davis (209) 853-2533 ext. 8# <a href="mailto:R4salmoned@wildlife.ca.gov">R4salmoned@wildlife.ca.gov</a>	<b>For Trout:</b> Cheryl Moxley (559) 243-4014 ext. 245 Fax: (559) 243-4004 <a href="mailto:R4salclass@wildlife.ca.gov">R4salclass@wildlife.ca.gov</a>	<b>For Salmon:</b> La Grange Office Attn: SIC PO Box 10 La Grange, CA 95329	<b>For Trout:</b> CDFW Attn: SIC 1234 E. Shaw Ave. Fresno, CA 93710
Los Angeles, Orange, San Diego, Santa Barbara and Ventura counties	Jennifer O'Brien (562) 626-9284 <a href="mailto:R5CAEP@wildlife.ca.gov">R5CAEP@wildlife.ca.gov</a>		CDFW, South Coast Region Attn: CAEP 4665 Lampson Ave., Suite C Los Alamitos, CA 90720	
Imperial, Riverside and San Bernardino counties	Hillary Grez Phone: (909) 944-0210 Fax: (909) 481-2945 <a href="mailto:R6southCAEP@wildlife.ca.gov">R6southCAEP@wildlife.ca.gov</a>		CDFW, Inland Deserts Region Attn: CAEP 3602 Inland Empire Blvd., Suite C-220 Ontario, CA 91764	
Inyo, Mono counties	CAEP staff Phone: (760) 872-1320 Fax: (760) 872-1284 <a href="mailto:R6northCAEP@wildlife.ca.gov">R6northCAEP@wildlife.ca.gov</a>		CDFW, Bishop Field Office Attn: CAEP/ TIC 787 N. Main St. Suite 220 Bishop, CA 93514	