



Northwestern State University Unmanned Aerial System (UAS) Application to Operate Form

Form instructions: Please fill out all sections of this form. When complete, email the form to the UAS committee at nsuehs@nsula.edu. After review, the UAS committee will contact you regarding your proposed operations. If approved, NSU F/S be required to carry their NSU ID, with an approved drone sticker at all times during operation. Non F/S will be required to carry an approval card at all times.

Any use of UAS on NSU Campuses without the approval of the committee could be a violation of Louisiana Revised Statute 14:337 (<https://www.legis.la.gov/legis/LawPrint.aspx?d=919584>)

Applicant Contact Information:

Name _____ Email _____

Department/Company/Organization _____

Phone Number (office) _____ (mobile) _____

Address _____ City _____

State _____ Zip _____

UAS Information:

UAS type: Fixed-wing ___ Multirotor ___ VTOL ___ Class ___ Other ___

UAS Make/Model _____

URL to UAS Specifications _____

UAS FAA Registration Number _____

Pilot in Command (PIC) Name _____

PIC phone# _____

Remote Pilot Certificate Number _____

Proposed Operation: Recreational ___ Research ___ Commercial ___

Location:

Approval Date: _____ End Date: _____

time: _____



Describe your proposed operation in detail. Describe your project's purpose and goals. List any special requirements your project may have.

Operator agrees to protect, defend, indemnify, save, and hold harmless, the State of Louisiana, all state departments, agencies, boards, and commissions, its officers, agents, servants, employees, and volunteers, from and against any and all claims, damages, expenses, and liability arising out of injury or death to any person or the damage, loss, or destruction of any property which may occur, or in any way grow out of, any act or omission of operator, its agents, servants, and employees, or any and all costs, expenses and/or attorney fees incurred by operator as a result of any claims, demands, suits or causes of action, except those claims, demands, suits, or causes of action arising out of the negligence of the State of Louisiana, all state departments, agencies, boards, commissions, its officers, agents, servants, employees, and volunteers.

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Operator agrees to investigate, handle, respond to, provide defense for and defend any such claims, demands, suits, or causes of action at its sole expense and agrees to bear all other costs and expenses related thereto, even if the claims, demands, suits, or causes of action are groundless, false or fraudulent.