

Ship Operations Evaluation Form Instructions

The Ship Operations Evaluation Form provides an avenue for your candid ratings and comments on how the ship met your scientific objectives. It is one method the Office of Marine and Aviation Operations (OMAO) uses to track performance of its ships in meeting these objectives. Data from the form will be incorporated into an OMAO database. This evaluation form is a confidential avenue for you to provide the Director, OMAO with your comments on how your cruise was supported. A summary of trends will be provided to the marine operation center for their information but not the individual forms.

The form should be filled out within 30 days after cruise completion and forwarded through either your Center or Laboratory Director to:

Office of Marine and Aviation Operations
Program Services and Outsourcing Division
1315 East West Highway
Silver Spring, Maryland 20910-3282

You are asked to rate five areas of support ranging from overall ship support and cruise success to the specific ship operational facilities. Space is available to list and rate any additional ship equipment not presently listed that was used.

You are requested to note whether or not pre- and post-cruise meetings were held. Space is provided in question 7 to list any additional facilities or equipment that you would have used if it was available. This information will be useful for future planning.

You are encouraged to provide any additional comments or concerns that you may have.

SHIP OPERATIONS EVALUATION FORM

Via: Center/Laboratory Director:

From:

Ship Name:

Chief Scientist or Field Party Chief:

Subject: Ship Operations Evaluation for
Cruise

Leg:

Please rate the following items using the following scale:
3-Excellent, 2-Good, 1-Adequate, 0-Poor, N-Not Applicable

1. Cruise success and overall ship support:	5. Ship's Operational Facilities:
a. Cruise Success	a. Scientific work areas
b. Overall Ship Support	b. Deck work areas
2. Ship's Personnel Support	c. Electrical power
a. Officers and/or Mates	d. Regulated power
b. Deck	e. HVAC adequacy
c. Engineering	f. Freezer space
d. Electronics (RET)	g. Adequate HAZMAT locker
e. Survey	h. Computer System (SCS)
f. Steward	i. CTD
g. Medical	j. ADCP
3. Ship's Morale	k. Thermosalinograph
4. Ship's Services:	l. Fathometers
a. Orientation	m. Netsonde
b. Safety	n. Navigational equipment
c. Medical	o. Winch metering system
d. Navigation	p. Trawl winches
e. Communications	q. Third-wire winch
f. Meal Quality	r. Oceanographic winches
g. Laundry	s. Hydrographic winches
h. Berthing	t. Other equipment used, please list and rate:
i. Television / Video	1.
6. Please respond Yes or No to the next 2 questions:	2.
a. Was a pre-cruise meeting held?	3.
b. Was a post-cruise meeting held?	4.
7. List by priority any capabilities, facilities, or equipment you would have used if they had been available:	
8. Please add additional comments on the attached continuation sheet	

CONTINUATION SHEET. Please use this page for additional comments