APPLICATION FOR POSSESSION/REHABILITATION PERMIT
MISSISSIPPI DEPARTMENT OF WILDLIFE, FISHERIES, & PARKS
MUSEUM OF NATURAL SCIENCE, 2148 RIVERSIDE DR., JACKSON, MS. 39202
ATTN: REHABILITATION PERMIT COORDINATOR

1. Applicant's Name: ______________________ Telephone No.: ______________________
   Address: ________________________________________________________________
   City, State, Zip: __________________________________________________________

2. Employer: ___________________________ Telephone No.: ______________________
   Address: ________________________________________________________________

3. Applicant's Profession: ___________________________
   _____________________________________________________________

4. List persons assisting that you desire to be named on your permit to work under your
direct supervision: ________________________________________________________
   ________________________________________________________________

5. Objective: ____________________________
   _____________________________________________________________

6. With certain exceptions, a federal permit will be needed in addition to the state
permit required to possess native birds, and the US Fish & Wildlife Service (USF&WS)
typically issues such permits to qualified individuals, not organizations. Thus, for
example, three individuals within a single group wishing to rehabilitate birds at
three different localities would be issued three individual permits by the Service.
The USF&WS may require possession of a state permit as a condition of issuance of
the federal permit. If you currently possess a federal permit, or if members of your
organization possess USF&WS permits, please provide the name(s) and number(s) below.
Otherwise, provide these numbers, when obtained, to the Mississippi Department of
Wildlife, Fisheries, and Parks prior to beginning rehabilitation work with birds.

   USF&WS Permit Number(s) and Permittees: _______________________________________
   __________________________________________________________________________

7. Comments or Special Licenses: _________________________________________________
   __________________________________________________________________________

8. Type of facility used for shelter/rehabilitation of animals: _______________________
   __________________________________________________________________________

9. Specimens will be disposed of as follows (be specific regarding disposal of dead
animals; live animals should be released in appropriate habitat as close to the
point of capture as is possible): _______________________________________________
   __________________________________________________________________________

10. Explain the type of educational program provided for staff and volunteers: _______
    __________________________________________________________________________

(see reverse side of application form)

ADDITIONAL REQUIREMENTS

Please provide a letter from one or more local veterinarians that have agreed to
offer advice and/or assistance to you in your rehabilitation efforts.

Please provide a letter from an established, permitted rehabilitation facility (list attached) that agrees to serve as a back-up/networker with your facility.

TERMS FOR ISSUANCE OF POSSESSION/REHABILITATION PERMIT

The Mississippi Department of Wildlife, Fisheries, and Parks regards the International Wildlife Rehabilitation Council/National Wildlife Rehabilitators Association minimum standards for wildlife rehabilitation as general guidelines for persons holding a rehabilitation permit, while recognizing that much of MS is rural, and that the standards utilized by the American Veterinary Association, the U.S. Dept. of Interior, and the U.S. Fish and Wildlife Service are also acceptable for wildlife in a rehabilitation situation.

Upon expiration of a permit, each permittee shall file a report within fifteen (15) days to Mississippi Dept. of Wildlife, Fisheries and Parks, Museum of Natural Science, 2148 Riverside Dr., Jackson, MS 39202 (Attn: Rehabilitation Permits). A completed report is required prior to permit reissuance or extension.

Applicant's Signature

*Provide any additional information that you may have which you think may be useful in our evaluation of your permit request.