

APPLICATION FORM
RESOURCE CONSERVATION WORKSHOP

1. Student Last Name: _____
2. Student First Name: _____
3. Student Middle Initial: _____
4. Name you'd like to be called: _____

5. Mailing Address – Street: _____
6. Mailing Address – City: _____
7. Mailing Address – State: _____
8. Mailing Address – Zip: _____
9. Mailing Address – County: _____

10. Email address where workshop correspondence should be sent (workshop details and best contact for last minute changes): _____

11. Gender: Female Male

12. Age: _____
13. High school class you will enter this coming Fall (freshman, sophomore, junior, senior): _____

14. Name of Parents: _____
15. Name of Parent that you live with: _____
16. Home Telephone: _____

17. Mother's Occupation: _____
18. Mother's Work Phone #: _____
19. Mother's Cell Phone #: _____

20. Father's Occupation: _____
21. Father's Work Phone #: _____
22. Father's Cell Phone #: _____

23. Previous conservation experience (clubs, activities, etc.): _____

24. Career plans, if known: _____
25. Candidate's Interest in Conservation (please respond using 250 words or less) – *please note, this response is very important and will be used by the local soil and water conservation district board to determine which student to sponsor to attend the workshop; please take time to provide a thoughtful response:*

STUDENTS – Please return your completed application to your local SWCD office.