

INSTRUCTOR TRAINING
APPLICATION FORM

WISCONSIN
Master Naturalist



Instructor Training Application

Please complete the following information and return it to the Wisconsin Master Naturalist Office as described below.

Training Course Selection

Check here to find a course near you: <https://wimasternaturalist.org/upcoming-instructor-courses>

I would like to take the following Instructor Training Course...

Date _____

Location _____

Your Name and Contact Information

Name _____

Affiliation _____

Address _____

Email _____

Phone _____

Fax _____

Host Organization (your current employer or sponsor)

Name _____

Address _____

Phone _____

Fax _____

Name of Director/Supervisor _____

Email of Director/Supervisor _____

Phone of Director/Supervisor _____

The Host Organization is aware and supportive of my involvement as an Instructor and is willing to host WIMN trainings.

_____ Yes _____ No _____ They'd like more information

My Qualifications

Post-Secondary Degree(s) & Areas of Study _____

Experience in Environmental Education/Outreach _____

Brief description of how becoming a Wisconsin Master Naturalist Instructor will support your work and/or the work of your host organization. _____

Please return the completed form to the Wisconsin Master Naturalist Office by email, info@wimasternaturalist.org or by FAX, 608-262-2031.

After your application is accepted, you will receive instructions on how to register online. The registration fee is \$75.00.

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