

West Virginia State Board of Registration for Foresters

APPLICATION FOR REGISTRATION AS:

FORESTER FORESTRY TECHNICIAN

1. General Information

Full Name: _____ SSN (last 4): _____

Home Address: _____

Home phone #: _____ E-mail: _____

Present Position: _____

Employer: _____

Employer Classification: Municipal Gov't State Gov't Federal Gov't Industry –Forester
 Industry – Oil & Gas Industry – Utilities Consulting Unemployed Other _____

Business Address: _____

Business Phone #: _____ Business E-mail: _____

Birthplace: _____ DOB: _____

(Give names and addresses of five references, not relatives, at least three (3) of whom are professional foresters having knowledge of your character and professional experience. Do not use Board members as references. Please limit the use of references from the company or agency for which you are employed.)

1. _____
2. _____
3. _____
4. _____
5. _____

Do you have child support obligations? ____ Yes ____ No Are you in arrears? ____ Yes ____ No

2. Registration In Other States

Are you registered in any other state(s): _____ Name of states(s): _____

Date of Certificate of Registration: _____ No. of Certificate(s): _____

Were you registered by written examination: _____ Is certificate now in force: _____

3. Membership in Societies, Associations, or Institutes (Professional or Scientific)

Use additional page if needed

Name of Organization	Executive Headquarters	Class of Membership	Date Joined	Offices & Committee Assignments

5. Professional Experience

(State in chronological order the experience you have had as a professional forester)

Date		Title of position held, Name of Employer and type of work	Name & Address of someone familiar with each position
From	To		

6. Affidavit

STATE OF _____

County of _____

_____, being first duly sworn, deposes and says: I, the Applicant named in this application, have read the contest hereof, and to the best of my knowledge and belief the foregoing statements are true.

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, _____.

Signature of Notary Public

My Commission Expires _____

7. Instructions for Applicant

1. This form must be completely filled out by the applicant, properly signed and notarized and mailed to:
 WV Board of Registration for Foresters
 PO Box 1032
 Ripley, WV 25271
2. The applicant must enclose a check or money order in the amount of \$50.00 payable to WEST VIRGINIA STATE BOARD OF REGISTRATION FOR FORESTERS and an official college transcript.
3. The applicant must pay an exam fee of \$100, take and successfully pass the exam prior to full licensure.

8. Record of the Board

(This space not to be used by the applicant)

Name of Applicant _____ Date Application Received _____

A'mt Received with Application \$ _____ Date Application Reviewed _____

Date of Examination (if given) _____ Results _____

Action of the Board _____

Date of Certificate (if issued) _____ No. of Certificate (if issued) _____