

CAB TX 2012 Application Form

June 10-20, 2012

Application Deadline May 31, 2012

Electronic Registration Form (Use TAB key to move from field to field)

STEP 1: Please complete the following information.

Last Name:		First Name:		M.I.:	
Address:					
Address:					
City:		State:		Zip Code:	
Home Phone:		Cell Phone:			
Work Phone:		Email:			
What is your job title?					
What subject(s) do you currently teach?					
What grade level(s) do you currently teach?					

What previous professional development outdoor learning experiences have you had? (include dates, locations, type of activities, and amount of time engaged in outdoor field investigations).

List special skills, experience, certifications or hobbies you have that could be useful and/or shared with other participants. (photography, first aid, fishing, camping, hunting, mountaineering, etc.)?

STEP 2: Review and complete items 1-5 below.

1. Statement of Purpose: State your personal and professional reasons for wanting to attend the CAB course. Enter **responses** in the field provided below.

Please indicate:

- (a) what are you interested in learning from the course,
- (b) how you currently integrate wildlife and conservation into your teaching practice, and
- (c) how will you incorporate new wildlife and conservation information and project-based field activities in your teaching.
- (d) your commitment to conduct an in-service presentation to fellow educators about your personal experience in the CAB course.

Responses (Use as much space as necessary):

- (a)
- (b)
- (c)
- (d)

2. Course Fee:

\$570 per teacher. \$250 is due with application, \$320 is due the first day of the course. The purpose of the course fee is to assist with costs for course supplies, textbooks, and field trips.

Payment must be made when the application is submitted.

Payment Type: Check Purchase Order Credit Card

School Purchase Order Number:

Credit Card Number (no spaces or dashes):

Expiration Date (mm/yyyy):

If you would prefer, you may also call 361-364-2643 and provide your credit card information to Jan Walker.

Checks should be made payable to: Welder Wildlife Foundation

IMPORTANT NOTE: Should the applicant cancel before the cancellation deadline of May 31, 2012, the applicant will be reimbursed the course fee minus a \$35 processing fee.

3. Travel (airline or ground) to and from the Course:

Selected applicants are responsible for making and paying for their own airline reservations and/or ground transportation to and from the course. If course is grant supported, a travel stipend will be offered.

4. Course Credit Policy:

Graduate credit is provided as an option and has no bearing on the selection process.

Graduate Credit* Sul Ross State University, Alpine, TX

_____ If selected, I would take the course for graduate semester credit (3 credits).

_____ If selected, I would not be interested in taking the course for graduate credit.

*Graduate credit is pending until final approval from the university. More information regarding graduate credit will be provided following your application.

5. Cancellation and Course Policies:

I (the applicant) will notify the Welder Wildlife Foundation (361-364-2643) of my cancellation as soon as possible, but NO LATER than May 30, 2012. This deadline will allow someone else to take my place. I understand that my (the applicant) course fee will NOT be reimbursed if cancellation is later than the May 31, 2012 deadline. If I cancel prior to the deadline, I will be reimbursed the course fee minus a \$35 processing fee.

I am presently in good health and know of no personal or physical limitation that would prevent my full participation in the CAB course. I will fill out the medical history form when provided and return it to the Welder Wildlife Foundation by the required deadline. I will be available to participate in the CAB course as indicated, and agree to obey such rules as established by the CAB program. I am willing to deliver a presentation on my CAB experience to my school, education program and/or interested group when I return home. Further, I give my permission for the Boone and Crockett Club and Welder Wildlife Foundation to use photographs taken of me for promotional purposes.

Date and sign to state you understand and agree to the course and cancellation policies:

Applicant's name:

Applicant's Signature:

Date:

Note: A COMPLETED APPLICATION includes:

- Answers to all questions in Step 1.
- Statement of purpose from Step 2.
- A partial course fee of \$250 (balance of \$320 is due on first day of course), signature and date.

STEP 3: Submit your application by email and send any attachments to:

Dr. Selma Glasscock at sglasscock@welderwildlife.org or send via U.S. Postal Service to:

**CAB 2012
Welder Wildlife Foundation
P. O. Box 1400
Sinton, TX 78387
Attn: Dr. Selma Glasscock**