



Humboldt Field Research Institute
PO Box 9, 59 Eagle Hill Road
Steuben, ME 04680-0009
Phone: 207-546-2821, Fax: -3042
E-mail: office@eaglehill.us
www.eaglehill.us

Application for Ecological Restoration Seminars Not Held at the Institute

Full Name _____ M / F ____ Age ____ Phone # (day) _____

Address _____ Phone # (eve) _____

_____ E-mail _____

City _____ State/Province _____ Zip / Postal Code _____

Soc. Sec. # _____

*Note: We need a complete address, with a street #, PO Box #, Zip+4, etc.

☐ Institute alumnus(a) ☐ 1st time applicant

I would like to participate in the following _____ seminar(s):

Title _____

Instructor _____ City _____ Dates _____

Title _____

Instructor _____ City _____ Dates _____

Alternate choice:

Title _____

Instructor _____ City _____ Dates _____

A few brief and thoughtful statements about yourself are an essential part of your application. Please answer all questions frankly and completely. Details are essential for planning purposes and are appreciated both by the instructors and staff.

* What are your specific interests, goals, and expectations for the above program(s)?

* Which of your experiences, classes, or interests are related to the above programs? What is your current career or career interest and institutional affiliation?

* Are you fully able to participate in field trips, some of which may involve hiking over uneven and/or awkward terrain? Please indicate any concerns you might have and how we might be able to help you. Information about field trips for seminars is available (please inquire).

* Accommodation recommendations will be sent to you. Arrangements need to be made by you. Would you be interested in rooming with someone if someone inquires? If so, do you have any personal habits, preferences, or concerns that you would like us to be aware of? Do you smoke or snore? Please be frank.

* Do you have any special medical conditions, dietary requirements, or food allergies we should be aware of that might apply to catered lunches or snack/beverage breaks? Please be specific. Information about meal options at the recommended residential facilities and host organization will be sent to you.

* Are you requesting a general discount? Only one of the following may be requested.

☐ Institute alumnus(a) of

☐ 1 previous seminar (10%); ☐ 2 or 3 seminars (15%); ☐ 4 or more seminars (20%).

☐ University student (10%)

☐ couple (10%)

☐ group (10%)

If you are a student, please list your university or college. If you are an alumnus(a), please list seminars you have attended:

* Are you requesting a general scholarship? Scholarships range from 10–50%. The number of scholarships is limited. Why do you think you merit and need an award? How much are you requesting?

* Would you like to earn university credits? Graduate or undergraduate credits? How many credits? From 1-2 credits are available for most seminars (arrangements with the University of Maine are pending for 2003). A special application form is available from the Institute during the seminar. There is an application fee.

* Would you like to earn continuing education units (= recertification credits)? A special application form is available from the Institute during the seminar week. There is an application fee.

* Sponsoring organization or agency information. Each agency form should have name of participant and seminar title, instructor, and dates.

Full payment is not due until you arrive for the seminar. I will be making payment for the seminar costs (tuition, meals, accommodations, other fees) with:

- ☐ check or credit card
- ☐ one combined purchase order or authorized training form
- ☐ several separate purchase orders or authorized training forms

* Are you interested in possibly carpooling if someone inquires?

* Other pertinent information, comments, questions, etc., are welcome!

* Name and phone number in case of emergency:

A deposit payment of \$175 is required to register my application and save my place in the seminar.

☐ I am faxing a copy or emailing a pdf of a purchase order to cover the deposit payment

☐ I will make the required deposit payment through the secure server (Once you submit this application, you will be given the option of going to the secure server to make this payment)

I understand that during my participation in this seminar, reasonable efforts will be made to assure my comfort and safety both at the host facility and in the field. I recognize my own responsibilities in this regard. Full details on liability are available.

Signed _____ Date _____

For more information, please write or call ...

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