

**CONSULTING FORESTERS ASSOCIATION
OF
VERMONT**

Membership Application

MEMBERSHIP QUALIFICATIONS

1. Article XI of our Constitution & Bylaws states: "Members shall have a bachelors and/or masters degree in forestry or an equivalent degree obtained from a Society of American Foresters (SAF) accredited institution and shall have two years of forest management work experience, or those with a two year degree in forestry from an (SAF) accredited institution shall have five years of forest management work experience"
2. All candidates must meet the education, skill, and work experience standards developed by the executive committee or the membership committee and adopted by the entire membership. Foresters not meeting the membership standards may become candidate members, but will not have voting privileges.
3. The minimum "skill and work experience standards" are:
 - a. The preparation and administration of five (5) forest product sales, that generate at least \$1000.00 each in stumpage revenue, and
 - b. The promotion of good forest management by presentation of three (3) public communications.

Name: _____ Title: _____

Business Name: _____

Home address: _____

Home telephone: _____

Business address: _____

Business telephone: _____

Cellular telephone: _____

E-mail: _____

EDUCATION

College Name and Address: _____

Society of American Foresters (SAF) Certified? YES NO

Date(s) Attended: _____

Major: _____ Degree & Year Received: _____

EMPLOYMENT

Employer/Experience: _____ Dates: _____

Address: _____

Job Description: _____

Full Time

Part Time

Employer/Experience: _____ Dates: _____

Address: _____

Job Description: _____

Full Time

Part Time

Employer/Experience: _____ Dates: _____

Address: _____

Job Description: _____

Full Time

Part Time

EXPERIENCE/SKILLS

1. List five (5) Use Value Appraisal or equivalent forest management plans that you have prepared. Please provide landowner name, state, and county.

2. List five (5) forest product sales which have generated at least \$1000.00 in stumpage revenue that you have administered. Please provide date(s), landowner name, state, and county.

3. List three (3) significant examples of oral or written communication for public consumption you have presented. (e.g. letters to the editor, radio talk show, school demonstration, publication, etc.)

- I wish to be considered:
 - A full member of CFAV A candidate member of CFAV
- For current dues information please contact the CFAV chair (see www.cfavt.org for contact information)
- Please send completed application and dues check to the presiding chair of the executive committee (see www.cfavt.org for contact information).

To The Best Of My Knowledge, This Information Is Correct & True:

Signature

Date: