

Workshop Proposal Form

Submit with tentative agenda at least six weeks prior to:

Kim Morris-Zarneke@dnr.ga.gov

Visit the GA DNR Facilitator website for workshop forms, ppt and evaluations:

<http://www.georgiawildlife.com/education/project-wild>

Facilitator Name: _____

Phone: _____ Email contact: _____

Address/City/Zip: _____

Ship To Name (if different than above): _____

(Address/City/Zip): _____

Invoice Name & Email if different than Facilitator: _____

Co-Facilitator(s) Name(s): _____

Workshop Information

Date(s) to be held: _____ Location: _____

Address/ City/ Zip: _____

Workshop Time: _____ Combination Project with PLT: YES NO

Number of Guides Requested: _____

Open to General Public or Closed to specific group (ROE/ In-Service, etc.) _____

Registration Instructions for advertisements (i.e. How do guests register/Pay; Contact for information, deadline to register): _____

Upon receipt of this form, the State Coordinator will automatically provide the facilitator with the Certificates of Completion.