



## APPLICATION

(Please Type or Print)

### Educator Resource Directory

Name of Topic: \_\_\_\_\_

**Category:**

- |                                                |                                               |                                                   |                                                |
|------------------------------------------------|-----------------------------------------------|---------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Agriculture/Animals   | <input type="checkbox"/> Ecology/Conservation | <input type="checkbox"/> Government/History       | <input type="checkbox"/> Psychology/Counseling |
| <input type="checkbox"/> Alcohol/Drugs         | <input type="checkbox"/> Education            | <input type="checkbox"/> Health/Safety            | <input type="checkbox"/> Real Estate           |
| <input type="checkbox"/> Banking               | <input type="checkbox"/> Employment/Careers   | <input type="checkbox"/> Industrial/Manufacturing | <input type="checkbox"/> Recreation            |
| <input type="checkbox"/> Building/Construction | <input type="checkbox"/> Fire Safety          | <input type="checkbox"/> Law Enforcement          | <input type="checkbox"/> Science               |
| <input type="checkbox"/> Communications        | <input type="checkbox"/> Foods/Nutrition      | <input type="checkbox"/> Parenting Progs. & Svcs. | <input type="checkbox"/> Transportation        |

Brief Description of Topic: \_\_\_\_\_

\_\_\_\_\_

Business or Agency: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Grade Level:  K-3  4-6  7-9  10-12

**Type of Presentation or Service:**

Speaker/Demonstration

Tour\*

Number of People you can accommodate on tour

Other \_\_\_\_\_

\*If "tour" checked, please name contact person if different from above:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Resource Manual/Materials Available?  Yes  No

