

National Garden Clubs, Inc.

THE LIVING EARTH ENVIRONMENTAL STUDIES SCHOOL REGISTRATION FORM

(Please print clearly)

Course No. _____ Series No. _____ Refresher _____

Bi-Refresher ___(ESS) ___(GS) ___(LDS) Tri-Refresher _____(ESS, GS, LDS)
(Check which school)

Place _____

Dates _____

State Garden Club _____

School Chairman _____ Phone _____ aaaaaaaaaa _____

Address _____ E-Mail _____ aaaaaaaaaa _____

City _____ State _____ Zip Code _____ Fax _____

Contact Person for TNG and Website:

Name _____ Position _____
(State ESS Chair, Local ESS Chair, Registrar)

Address _____ aaaaa _____ Phone _____ E-Mail _____ aaaaaaaaa _____

City _____ State _____ Zip Code _____ Fax _____

Permission is given to use my name, address, phone #, fax and/or e-mail as listed above. _____
(Signature)

SUBJECT (S)	HOURS	INSTRUCTORS
_____	_____	Name _____ Address _____ Phone _____ E-mail _____
_____	_____	Name _____ Address _____ Phone _____ E-mail _____
_____	_____	Name _____ Address _____ Phone _____ E-mail _____
(See Reverse)		Phone _____ E-mail _____

State ESS Chairman – Send four completed copies to the NGC, Inc. ESS Accrediting Chairman with registration fee (\$5.00)
Make check payable to NGC, Inc.

Approved by _____ Date _____
NGC, Inc. ESS Accrediting Chairman

National Garden Clubs, Inc.

THE LIVING EARTH ENVIRONMENTAL STUDIES SCHOOL INSTRUCTOR'S PROFILE

(Please print clearly)

Please fill out the following form and return promptly to the State Environmental Study Schools Chairman listed below. It will then be forwarded to the NGC, Inc. ESS Accrediting Chairman.

Instructor's Name _____ Phone _____

Address _____ E-Mail _____

City _____ State _____ Zip Code _____ Fax _____

Education:	College/University	Degree	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Additional Training _____

Present Position _____

Teaching Experience _____

Lecturing Experience _____

Special Interests _____

Additional Information _____

Approved by _____ Date _____
State ESS Chairman

Address _____ Phone _____ E-mail _____

Approved by _____ Date _____
NGC, Inc. ESS Accrediting Chairman

National Garden Clubs, Inc.

THE LIVING EARTH ENVIRONMENTAL STUDIES SCHOOL INSTRUCTOR'S CONTRACT

(Please print clearly)

I, _____ agree to teach _____
(Instructor's Name) (Subject (s))

on _____, at _____ at _____
(Date) (Time) (Location)

for a fee of \$ _____ or \$ _____ per hour for a maximum of _____ hours.

Total mileage expense \$ _____ Exam Required Yes No

Other anticipated expenses \$ _____

I understand that I will submit a detailed outline of my presentation suitable for duplication for the students at least six (6) weeks in advance of the course date. The school textbook is "*Living in the Environment*" by G. Tyler Miller, Jr.. I will also submit **five multiple choice questions** with answers for the exam with the outline.

Equipment needed for presentation. (Please be specific) Microphone _____, Projector _____, Screen _____, Overhead _____, Tables _____, Other _____.

Lunch will be provided. Will you be available? Yes _____ No _____

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Cell Phone _____ E-mail _____

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Sponsoring Organization _____

ESS School Chairman _____

Address _____

Phone _____ E-Mail _____ Fax _____

National Garden Clubs, Inc.

THE LIVING EARTH ENVIRONMENTAL STUDIES SCHOOL COURSE ROSTER

COURSE NUMBER _____ **SERIES NUMBER** _____

(Send four copies to NGC, Inc. ESS Accrediting Chairman)

(Please print clearly)

Series No. _____ Course No. _____ State _____

Course Dates _____ Location _____

State ESS Chairman _____ Email _____

Address _____ Telephone No. _____

State and Zip _____ Fax No. _____

Number Enrolled _____ Number Taking Exam _____ Number Refreshing _____

Amount submitted for credit and refreshing at \$ _____ per student = \$ _____
(\$5.00 per student) (Total)

Make check payable to NGC, Inc.

List Students alphabetically – type or print legibly; indicate with a check if taking course for credit (C) or refresher (R). Use (M) of member of a NGC, Inc. Garden Club; (NM) non-member of NGC, Inc. Garden Club.

to fill out the columns, type across the page, using the space bar to separate entries. Tab to the next line.

C	R	M/NM Name	Address
_____	_____	1. _____	_____
_____	_____	2. _____	_____
_____	_____	3. _____	_____
_____	_____	4. _____	_____
_____	_____	5. _____	_____
_____	_____	6. _____	_____
_____	_____	7. _____	_____
_____	_____	8. _____	_____
_____	_____	9. _____	_____
_____	_____	10. _____	_____
_____	_____	11. _____	_____
_____	_____	12. _____	_____
_____	_____	13. _____	_____

Approved by _____ Date _____
Signature NGC, Inc. ESS Accrediting Chairman

14. _____

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Approved by _____ Date _____

Signature NGC, Inc. ESS Accrediting Chairman

National Garden Clubs, Inc.

THE LIVING EARTH ENVIRONMENTAL STUDIES SCHOOL APPLICATION FOR ENVIRONMENTAL CONSULTANT ACCREDITATION (Please print clearly)

Name of Applicant _____

Street or P.O. Box _____

City State Zip Code

Phone _____ E-mail _____

Name of Applicant's Garden Club _____

Name of State Garden Club _____

ENVIRONMENTAL STUDIES SCHOOLS COURSES COMPLETED

Course	Series	Location – City and State	Date Course Completed	Passed

Student: Complete the application and mail with \$5.00 to your state ESS Chairman.

State ESS Chairman: Verify student's record against your state's records and initial column "Passed", sign and send four copies along with fee to NGC, Inc. ESS Accrediting Chairman. Retain one copy for your file.

NGC, Inc. ESS Accrediting Chairman: Verify records, sign and send one copy to NGC, Inc. Headquarters School's Secretary with check. Send one copy to State ESS Chairman, one copy to NGC, Inc. ESS Chairman and retain one copy for your file..

Approved by _____ Date _____
Signature State ESS Chairman

Approved by _____ Date _____
Signature NGC, Inc. ESS Accrediting Chairman

National Garden Clubs, Inc.

THE LIVING EARTH ENVIRONMENTAL STUDIES SCHOOL APPLICATION FOR ENVIRONMENTAL CONSULTANT REFRESHER (Please print clearly)

Name of Applicant _____

Street or P.O. Box _____

_____ City State Zip Code

Phone _____ E-mail _____

Name of Applicant's Garden Club _____

Name of State Garden Club _____

Date of Accreditation Certificate _____ Course ___ Series ___ Location _____

ENVIRONMENTAL STUDIES SCHOOL REFRESHER COURSES COMPLETED

Course	Series	Location – City and State	Date Course Completed	Completed

Note: One Refresher Credit permitted per calendar year.

Consultant: Complete the application and mail with \$5.00 to your state ESS Chairman.

State ESS Chairman: Verify consultant's record against your state's records and initial column "Completed", sign and send four copies along with fee to NGC, Inc. ESS Accrediting Chairman. Retain one copy for your file.

NGC, Inc. ESS Accrediting Chairman: Verify records, sign and send one copy to NGC, Inc. Headquarters School's Secretary with check. Send one copy to State ESS Chairman, one copy to NGC, Inc. ESS Accrediting Chairman and retain one copy for your file.

Approved by _____ Date _____
Signature State ESS Chairman

Approved by _____ Date _____
Signature NGC, Inc. ESS Accrediting Chairman

National Garden Clubs, Inc.

THE LIVING EARTH ENVIRONMENTAL STUDIES SCHOOL APPLICATION FOR ENVIRONMENTAL MASTER CONSULTANT (Please print clearly)

Name of Applicant _____

Street or P.O. Box _____

_____ City State Zip Code

Phone _____ E-mail _____

Name of Applicant's Garden Club _____

Name of State Garden Club _____

Date of Accreditation Certificate _____ Course ___ Series ___ Location _____

ENVIRONMENTAL STUDIES SCHOOL REFRESHER COURSES COMPLETED (4 Required)

Course	Series	Location – City and State	Date Course Completed	Completed

Note: One Refresher Credit per calendar year.

ESS Consultant: Complete the application and mail with \$5.00 to your state ESS Chairman.

State ESS Chairman: Verify ESS Consultant's record against your state's records and initial column "Completed", sign and send four copies along with fee to NGC, Inc. ESS Accrediting Chairman. Retain one copy for your file.

NGC, Inc. ESS Accrediting Chairman: Verify records, sign and send one copy to NGC, Inc. Headquarters School's Secretary with check. Send one copy to State ESS Chairman, one copy to NGC, Inc. ESS Accrediting Chairman and retain one copy for your file.

Approved by _____ Date _____
Signature State ESS Chairman

Approved by _____ Date _____
Signature NGC, Inc. ESS Accrediting Chairman



**THE LIVING EARTH
ENVIRONMENTAL STUDIES SCHOOL
APPLICATION FOR
EMERITUS STATUS**
(Please print clearly)

Name of Applicant _____
(Please type or print, giving same name as on last certificate)

Street or P.O. Box _____

_____ City State Zip Code

Phone _____ E-mail _____

Name of Applicant's Garden Club _____

Name of State Garden Club _____

Date of Master Certificate _____

=====
NGC, Inc. Headquarters:
Please remove the above referenced NGC, Inc. Environmental Consultant from the active file and note as Emeritus.

Approved by _____ Date _____
Signature State ESS Chairman

Approved by _____ Date _____
Signature NGC, Inc. ESS Accrediting Chairman

**THE LIVING EARTH
ENVIRONMENTAL STUDIES SCHOOL
APPLICATION FOR EXTENSION**
(Please print clearly)

Name of Applicant _____
(Please type or print, giving same name as on last certificate)

Street or P.O. Box _____

_____ City State Zip Code

Phone _____ E-mail _____

Name of Applicant's Garden Club _____

Name of State Garden Club _____

Status: **Student** . Request extension prior to the expiration of five-year period for completion of courses.

Course(s) needed: Course I Course II Course III Course IV

Reason for extension _____

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Status: **Consultant** . Request extension prior to the expiration of five-year period for completion of courses.

Date of Certificate _____

Reason for extension _____

Approved by _____ Date _____
Signature State ESS Chairman

Approved by _____ Date _____
Signature NGC, Inc. ESS Accrediting Chairman



**THE LIVING EARTH
ENVIRONMENTAL STUDIES SCHOOL
APPLICATION FOR REINSTATEMENT
ENVIRONMENTAL CONSULTANT ACCREDITATION**
(Please print clearly)

Name of Applicant _____
(Please type or print, giving same name as on last certificate)

Street or P.O. Box _____

_____ City State Zip Code

Phone _____ E-mail _____

Name of Applicant's Garden Club _____

Name of State Garden Club _____

I am applying for reinstatement as an Environmental Consultant. I have attended all of the lectures and field trips with a passing exam grade of 70% for the following two Environmental Study Courses.

Please check if the exam requirement was waived because the consultant is over seventy years of age, _____

Series ___ Course ___ held at _____
City State Dates

Series ___ Course ___ held at _____
City State Dates

My last expired Certificate is dated _____ and was earned in the state of _____

Date _____ Signed _____

STATE ESS CHAIRMAN: After checking student's Attendance Card and Class Roster to affirm that all lectures were attended and examinations were passed successfully, sign the application and mail to the NGC, Inc. ESS Accrediting Chairman.

Approved by _____ Date _____
Signature State ESS Chairman

Approved by _____ Date _____
Signature NGC, Inc. ESS Accrediting Chairman