

WWRA Education Grant Application

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Work #: \_\_\_\_\_ Home #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Training Session Attending: \_\_\_\_\_

Date(s) of Session (include year): \_\_\_\_\_

First Time Applicant?  Yes  No If no, indicate year received \_\_\_\_\_

Cost of training session including travel, lodging & meals: \_\_\_\_\_

Amount requested (max amount \$200): \_\_\_\_\_

Briefly describe your involvement in rehabilitation or other wildlife work:  
\_\_\_\_\_  
\_\_\_\_\_

Years of experience: \_\_\_\_\_

Indicate your interest or purpose of attending: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you hope to gain from this educational experience? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*If accepted I agree to submit an article about my experience, which will be published in the WWRA newsletter. The article should be a minimum of two paragraphs and sent to WWRA within 60 days of the completion of the training session. The article can include what you learned, a particular procedure, new technique, natural history, etc.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Email application to [sue.debruin@bankmutual.com](mailto:sue.debruin@bankmutual.com) or mail to WWRA, 1660 East Shore Dr., Green Bay WI 54302.