

**ELM FORK CHAPTER OF TEXAS MASTER NATURALIST™
PROJECT INITIATION FORM**

PROJECT #: P-
(Assigned by Project Coordinator)

PROJECT NAME:

Master Naturalist PROJECT MANAGER:

PHONE #: EMAIL:

PROJECT ADDRESS/LOCATION:

*Attach map or directions

ORGANIZATION/PERSON ASSISTED:

CONTACT PERSON:

PHONE #: EMAIL:

BRIEF DESCRIPTION OF PROJECT & Master Naturalist Role/Participation:

Conservation/Established _____ Create/New _____ Restoration _____

LAND IMPACT/ACRES: _____

Expected Start Date: _____ Expected Completion Date:

Date Submitted: _____

The Board of the Elm Fork Chapter of Texas Master Naturalist™ on
_____ day of _____, 20 ____, approved this project.

The Board made the following recommendations or requirements: