**Request for Approval of Advanced Training (AT) Opportunity**

To find out if an Advanced Training opportunity is already approved, contact the Advanced Training Director at prairieoaksmasternaturalist@gmail.com.

To request approval of a new Advanced Training (AT) opportunity:

1. Ensure that it meets the Texas Master Naturalist mission & criteria
2. Print and complete this form
3. Scan and email your completed form to prairieoaksmasternaturalist@gmail.com.

Items with an asterisk (\*) must be completed.

\*Member Requesting Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Name of Advanced Training Opportunity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Advanced Training Opportunity Title for VMS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Date of Training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Estimated Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Type of Training (Check all that apply):

* Lecture
* Hands-On
* Presentation/Demonstration
* Other

Session Leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sponsoring Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TEXAS MASTER NATURALIST MISSION

*The mission of the program is to develop a corps of well-informed volunteers to provide education, outreach, and service dedicated to the beneficial management of natural resources and natural areas within their communities for the state of Texas.*

\*How does this training meet the Texas Master Naturalist mission? (check all that apply).

* Promotes continued learning and development of naturalist skills?
* Provides Master Naturalists with knowledge and skills to work in volunteer efforts?
* Directs trained volunteers toward specific programs in need of their services?
* Provides natural resource management issues and information applicable to Texas with a preferred emphasis on the Chapter’s local community or ecoregion?
* Directly addresses the management of natural resources?
* Provides practical information and training for application in volunteer efforts?
* Takes advantage of local partnerships?
* Provides Master Naturalists an opportunity to focus their interests in one or a few specific topics?
* Builds on the core curriculum initially provided by the local Chapter?
* Is the program/training provided by a person who is a recognized authority or skilled in the subject matter?

To be completed by Advanced Training Committee:

Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_