

DOUG TARRY NATURAL HISTORY FUND YOUNG ORNITHOLOGISTS' WORKSHOP APPLICATION FORM



Please return this application and all necessary attachments by email to
Ipbo@birdscanada.org, subject: Doug Tarry Bird Study Awards. Application deadline is April
30 . Award winners will be notified by 15 May.

Name: Address:					
City: Phone: E-mail:		Province:		Postal Code:	
Age:	Present (or last co	mpleted) Grade	2:		
Citizenship:					
How did you	find out about this	workshop?			
How many species of Canadian birds are you able to identify (circle one)?					
30-50	51-75	76-100	101-125	>125	
About how many different species of birds have you seen in your life?					
At what age did you become interested in birds?					
List any other	interests you have	in science and,	or natural histo/	ry:	

List any natural history clubs or organizations you belong to:

What career(s) are you thinking of pursuing?

Physical health	(circle one):
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Good

Allergies:

Parents'/Guardians' Name(s):

Phone number(s) where parents/guardians can be reached:

Home: Business:

Which workshop session would you prefer to attend? Please note that we will try to accommodate your preference, but it may not be possible in all cases (circle one).

August 1-9 August 15-24

Please attach a letter of support from one adult reference (e.g., example a teacher, scout leader, head of naturalist club). This letter should attest to your ornithological interest and skills.

Name:

Position:

Relationship to you:

Address:	
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Phone:

Province:

City:

Postal Code:

On a separate page(s), please:

a) Write a one-page essay about why you want to participate in this workshop.

AND

a) Write a one-page essay telling us what your favourite bird is and why, ORb) Illustrate your favourite bird (in black & white or colour).

Your Signature:	Date:
Signature of Parent or guardian:	Date: