Ohio Certified Volunteer Naturalist Program Hosts – OSU Extension and Metroparks Toledo

LUCAS COUNTY



Name:	
Mailing Address:	
County where you reside:	
Phone:	
Email:	

What are your reasons for wanting to become an Ohio Certified Volunteer Naturalist?

Please explain why you feel you are a good candidate for the OCVN program:
Please tell us about any other OCVN course or similar programs you have participated in
previously. Include approximate dates of your involvement.
Tell us about any park districts, nature centers, schools, or similar institutions where you are a volunteer or have recently provided volunteer services:
LOCATION ACTIVITIES

times you will not be able to at	ttend. Note that you ma	re. Please indicate any dates or ay miss a maximum of two classes OCVN coordinator to make up for
Dates I cannot attend class:		
	ould have worked with yo e of your qualifications. P	skills, abilities and qualifications to u on projects and activities and/or have lease only provide names of individuals
Name	Phone	Email
The information I have provid knowledge.	led on this applicatior	n is accurate to the best of my
Signature		Date
Applications are due by Septe class size, we recommend yo	*	

@ Toledo Botanical Garden5403 Elmer DriveToledo, Ohio 43615

OSU Extension, Lucas County

Or send a **signed** and **scanned digital copy** to Amy Stone at the following email stone.91@osu.edu in the subject line: OCVN Application.