

Mississippi Hills Master Naturalist Advanced Training Proposal

Submitted by:

Phone/Email Contact:

Training Title:

Training Sponsor:

Location:

Date(s) and Length of Training:

Cost of Training:

Description: *(attach syllabus, description or outline if available. Specify if there is a field component.)*

What knowledge can volunteers gain through this training?

What new skill(s) can volunteers expect to learn?

Where can more information be found:

Chapter Records (for official use only)

Date Request Received _____

Approved _____

Disapproved _____

Date _____

Reviewer's Initials _____