

Watersheds of the Salt River Basin

July 26-30, 2004

PLEASE TYPE OR PRINT (Application MUST be completed by participant)

Name _____

School _____

School Street Address _____

City _____ State KY Zip _____ County _____

School Phone (_____) _____ Fax (_____) _____

Home Address _____

City _____ State _____ Zip _____ County _____

Home Phone (_____) _____ E-mail _____

Grade Level _____

Names of School Principal and Superintendent _____

To this application, please attach a 1/2 to 1 page statement as to how you think attending this conference will enhance how/what you teach about Watersheds. Include anything you think will help us understand how you plan to use the information you receive in your classroom, school and community.

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1. Please note any special dietary requirements \_\_\_\_\_  
\_\_\_\_\_
2. Other special needs \_\_\_\_\_
3. A \$50 refundable registration fee is due WITH the application. CHECK # \_\_\_\_\_
4. How did you hear about this conference? \_\_\_\_\_

*Participants will receive \$100 stipend per day  
Mail completed form and refundable payment to:  
Stephanie Jenkins • Tracy Farmer Center for the Environment • 233 Mining and Minerals Building •  
Lexington, KY 40506-0107*

*Telephone: 859-257-1299  
Email [swjenk2@uky.edu](mailto:swjenk2@uky.edu)*

*Participants will be notified when the selection process is completed. Meals for July 26-30 will be covered by the grant.*

**REGISTRATION DEADLINE IS MAY 27, 2004**