# https://scontent-ord1-1.xx.fbcdn.net/v/t1.0-9/13934712_273855206329004_1940532772427385163_n.jpg?oh=b93333d9fbb3df06711ac3f85f9cd675&oe=581C98BAGreen Bay American Association of Zoo Keepers Image result for aazk logo

Professional Development Grant-

Conferences, Meetings for Educational Opportunities

Applications will be reviewed by a committee of three impartial, non-AAZK members to select the winner(s).

Applications due by \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

## Employment and AAZK information

|  |  |  |  |
| --- | --- | --- | --- |
| Green Bay AAZK member | YES[ ]  | NO[ ]  |  No. of years \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| National AAZK member | YES[ ]  | NO[ ]  |  No. of years |  |

|  |  |
| --- | --- |
| Employer: |  |

Previous Conferences/Continued Education (as it applies to AAZK/conservation)

|  |  |  |  |
| --- | --- | --- | --- |
| Year (s) | Conference | Year (s) | Conference  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Have you received previous AAZK Grants? | YES[ ]  | NO[ ]  |   |

|  |  |
| --- | --- |
| Year | AAZK Grant received  |
|  |  |
|  |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Do you have other AAZK Committee Experience? | YES[ ]  | NO[ ]  |   |

|  |  |
| --- | --- |
| Year | Committee Name (s) |
|  |  |
|  |  |
|  |  |

## Continuing Education Forum

Title of Event for you are applying for grant for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Requested ($200 available): $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| I will accept partial funding: | YES[ ]  | NO[ ]  |

Travel Dates/Date of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe any matching funds: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe the Project or Continuing Education Event for which you are applying. Please include how it will directly benefit your continuing education and Green Bay AAZK.

|  |
| --- |
|  |

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to the Grant, I understand that false or misleading information in my application may result in revocation of the Green Bay AAZK Professional Development Grant. I also understand that acceptance of this grant will require that upon my return from the event I will do a presentation of said event, and any knowledge or experience that I gained by attending, at an AAZK chapter meeting.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |