



APPL# _____
For Office Use Only

STATE OF NEW HAMPSHIRE
APPLICATION FOR LICENSURE AS A
FORESTER

\$60.00 Application Fee

The application must be filled out completely and typewritten

A Balance of \$60.00 is required upon licensure

Check Payable to "Treasurer, State of NH" or complete the enclosed credit card form **(Non-Refundable Fee)**

1. General Information

Name _____

Last

First

Middle

Names Previously Used (if applicable) _____ SS# _____

Residence Address _____
zip code _____

Present Position (Organization & Title) _____

Business Address _____
Indicate mailing address by check box _____ zip code _____

Business Phone _____ Home Phone _____

Email: _____ Citizenship: Birth _____ Naturalized _____

Place of Birth _____ Date of Birth _____

2. Registration/Licensure Information

State in which first registered or licensed as a Forester _____

Date Issued _____ License/Registration/Certification Number _____

Expiration Date _____ Is License now in force? _____

If not in force, indicate why _____

Licensed by Examination? _____ If not how? _____

Location of exam _____ Date _____ Grade Awarded _____

Have you **ever** applied for licensure as a Forester in **New Hampshire**? _____ Status _____

Professional Licenses: List all states where you hold or have held licensure. Use a separate sheet if necessary.

License #	State	Year Licensed	#Hours Written Examination	Reciprocity or Grandfather	Active or Lapsed

3. General Information Questions

CHECK ONE:

YES NO

1. Have you ever lost or been denied registration/licensure as a forester or disciplined by this board or another forester licensing board in any other State?
If so, provide a written explanation of the circumstances.

2. Have you ever been convicted of a felony or misdemeanor, or violation associated with forestry or the practice of forestry including timber harvesting and incidental activities pursuant to RSA 310-A:98, IV?
If so, provide a written explanation including details of the offense, name of the court, date of conviction and the sentence imposed.

If the answer is yes to any of the above questions, you are required to submit a written explanation with your application

4. Membership in Professional or Scientific Associations

Name of Organization	Location	Grade or Membership	Date

5. Education

1. Official transcripts are required and must be sent directly to the board office from the college or university.

INSTITUTION AND LOCATION	FROM	TO	MAJOR	DEGREE AWARDED/DATE
Secondary School				
1.				
2.				
Colleges and Universities:				
1.				
2.				
3.				
4.				

6. Professional Experience

This information described below must be in detail, and should start with your first forestry work experience. Use this page as a summary and place detailed information pertaining to your forestry experience on enclosed supplemental experience record sheet. **Experience listed on your supplemental experience page must correspond with the experience requirements of Fors 302.02.**

Date	1. Name of Employer - Title of Position	Name and present address of someone familiar with each position, preferably person to whom applicant reported or with whom he/she was associated.
Indicate years	2. Location and Character of Each Position	
From to	3. Degree of Responsibility	

7. References of Character and Qualifications

Each applicant for licensure shall provide the board with the names and addresses of not fewer than 5 individuals, as references, not related to the applicant, of whom 3 or more shall be individuals having personal or professional knowledge of the applicant's forestry experience and 2 of these being foresters as defined by RSA 310-A:99, and **one forester reference shall be an individual not connected with the applicant's current place of employment**. No member of the Board will be accepted as a reference. The board shall use as references any individuals, companies, or institutions whose names appear in any part of the completed application. Written references will be submitted to the Board on forms supplied by the Board and are part of this application packet.

Name	Address including zip code	Occupation/License	Business Relationship to Applicant

8. Affidavits

I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the certificate of licensure, as applied for, but also to the retention of said certificate, if issued.

Signature of Applicant

Date

ADDRESS ALL COMMUNICATIONS TO:

NH OPLC – TECHNICAL DIVISION
121 SOUTH FRUIT STREET, SUITE 201
CONCORD, N.H. 03301

Find us on the on-line at www.oplc.nh.gov/foresters/index.htm

SUPPLEMENTARY EXPERIENCE RECORD IN DETAIL

- ✓ **Read instructions carefully.** The Supplementary Experience Record is vital to the Board's evaluation of your forestry experience.
- ✓ **Affix** your signature and date to this and each additional sheet. Add additional sheets as required. Use plain white pages and number consecutively.
- ✓ **List and identify** your projects and/or assignments in chronological order, starting with your first work experience as a forester, identifying at least **50%** of your specific experience in **core forestry areas** per **Fors 302.02 (f) (1)** and an additional **50%** of your experience in other areas outlined per **Fors 302.02 (f) (2) & (3)** and earned in the appropriate time frame per Fors 302.02 (b) (1)-(5). See enclosed administrative rules.
- ✓ **Read** your first draft critically. Does it show a reviewer, who is not familiar with you or your experience, the degree of forestry expertise you applied?
- ✓ **Ensure** that you verify time-wise the Forestry experience claimed in your application.

Signature _____ **Date** _____
(ALSO SIGN AND DATE EACH ADDITIONAL SHEET)

**STATE OF NEW HAMPSHIRE
BOARD OF LICENSURE
FOR FORESTERS**

CANDIDATE REQUIREMENTS

302.02 (c)-(f) Re-Adopted 8/24/06

Fors 302.02 Experience Requirements.

(a) Experience in the practice of forestry shall be of a grade and character that indicates to the board that the applicant is competent to practice as a forester. If experience is claimed under Fors 302.02, an affidavit stating the dates of said employment, the types of work performed and the names and address of employers shall be provided.

(b) Experience shall be determined as follows:

(1) Applicants possessing a 4-year forestry degree shall have 2 years experience which is equivalent to 4000 hours within not less than 24 months and not more than 60 months of the date of application.

(2) Applicants possessing a 2-year forestry degree shall have 4 years experience pursuant to Fors 302.02 which is equivalent to 8000 hours within not less than 48 months and not more than 72 months of date of application.

(3) Applicants possessing a 4-year degree in a related field shall have 4 years experience pursuant to Fors 302.02 which is equivalent to 8000 hours within not less than 48 months and not more than 72 months of the date of application.

(4) Applicants possessing a 2-year degree in a related field shall have 6 years experience pursuant to Fors 302.02 which is equivalent to 12000 hours within not less than 72 months and not more than 120 months preceding the date of application.

(5) Applicants possessing no forestry or related degree shall have 8 years experience pursuant to Fors 302.02 which is equivalent to 16000 hours within the 10-year period preceding the date of application.

(c) Experience shall be gained under the supervision of a licensed forester or if not, written explanation shall be included with the application describing why the experience should be considered satisfactory to the board.

(d) Experience not gained under the direction of a licensed forester shall be considered satisfactory by the board if:

(1) Experience in the practice of forestry was earned in accordance with Fors 302.02 (f) (1), (2) and (3);

(2) Experience in the practice of forestry was earned without violating Fors 501.03; and

(3) The candidate committed no misconduct pursuant to RSA 310-A:112.

(e) Failure of candidates whose experience is not gained under the direction of a licensed forester to meet the experience requirements of Fors 302.02 (f) (1),(2) and (3) shall, after notice and opportunity for a hearing, result in denial of the application.

(f) Experience in the practice of forestry shall be determined pursuant to RSA 310-A:104 as follows:

(1) A minimum of 50% of required experience shall demonstrate competency in all of the following core areas:

- a. Preparation of comprehensive forest management plans;
- b. Land use and forest type mapping;
- c. Development and implementation of silvicultural prescriptions which means a planned series of treatments designed to change current stand structure to one that meets management goals;
- d. Timber cruise and inventory;
- e. Boundary line location and maintenance pursuant to RSA 310-A:54, IV;
- f. Timber harvesting supervision;
- g. Marketing of timber products;
- h. Timber sale administration;
- i. Road and harvest layout; and
- j. Knowledge of New Hampshire forestry laws;

(2) In addition to experience in core areas required per Fors 302.02 (f) (1), satisfactory experience shall be in one or more of the following areas:

- a. Land surveying;*
- b. Wildlife management;*
- c. Natural resource research or education;*
- d. Timber stand improvement;*
- e. Logging;*
- f. Timber law enforcement;*
- g. Log scaling;*
- h. Saw milling;*
- i. Forest fire control;*
- j. Soil science pursuant to RSA 310:A-76, II;*
- k. Arboriculture;*
- l. Urban forestry;*

- m. Land use planning;*
- n. Conservation biology;*
- o. Wetland delineation pursuant to RSA 310-A:76, II-a or;*
- p. Wood procurement.*

(3) Applicants who do not meet the experience required pursuant to Fors 302.02 (f) (1) and (2) shall demonstrate experience and competency in specialty areas such as:

- a. Timberland appraisal;*
- b. Teaching of forestry at a college or university level;*
- c. Teaching natural resource science at a college or university level;*
- d. Public extension forestry and natural resource education work, or*
- e. Forest policy in a governmental or management position.*

(g) Experience shall be in accordance with the rules of professional conduct set forth in Fors 501. Conduct proscribed by the rules of professional conduct, when performed by an unlicensed person or during a prior period of licensure, shall result in denying a license application or issuing a restricted license.



APPLICATION INSTRUCTIONS AND CHECKLIST FOR FORESTER APPLICANTS

General- Provide all the information requested on the application form. **Do Not** substitute a resume or other synopsis of your experience and/or education for any part of the application form. Please refer to Administrative Rules Fors 302.02 (a) – (g) and explain your experience in each of the areas listed including your core forestry and other pertinent experience in detail.

Although not required, to facilitate review of your application it is advised that candidates for licensure submit a stewardship plan for a forestland parcel of a minimum of 100 acres that qualifies as a US Forest Service Stewardship Program Management Plan. Pursuant to Fors 302.02 (f, 1, a,b, and c). The stewardship plan must be prepared under the direction of a licensed forester or as otherwise allowed by law. The applicant is responsible for the collection of information and drafting of the plan.

References- Make a sufficient number of copies of our **Reference Form** to send one to each of your references. Keep a blank one for your future use, in the event a reference does not respond. In addition to the reference form, you should send each of your references a **stamped** envelope on which you have placed the Board address label. Reference forms received from applicants are **not** acceptable, forms must come directly from the reference. One Forester reference must not be connected with your current place of employment.

Transcripts- Transcript Request Forms are included as a part of this application packet. Complete the form/s and send it/them (and any required fee) to the college or university you attended including Undergraduate and Masters transcripts if applicable. Transcripts received from the applicant are not accepted. Transcripts must come directly from the college/university to our office.

Notice to all applicants- Be sure you submit your application to the Board before you send out your reference forms. We must receive your application prior to receiving forms from your references. If we receive responses from your references and do not have your application on file, they may be misplaced, causing a delay in the processing of your application. Complete the enclosed checklist and return it to the Board office with your application.

RETURN THIS CHECKLIST WITH YOUR APPLICATION

APPLICATION CHECKLIST

Candidate Name

Before you mail your application to the Board, please check the following items carefully. Your attention to these details will make it possible for the Board Staff to process your application without delay.

Have you:

- Marked the box on the application form indicating which address you want us to use?
- Requested your college/university to send us your transcript directly?
- Completed the "References" portion of the application, sent reference forms and Board addressed and stamped envelopes to each of your references, and kept a blank copy of the form for yourself?
- Filled in the detailed experience summary sheets corresponding your experience to Administrative Rule Fors 302.02? (copy if needed)
- Included a 100 Acre Management Plan that Qualifies as a US Forest Service Stewardship Program Management Plan?
- Signed the application and supplemental experience sheets?
- Included the correct fee with the check made payable to **Treasurer, State of NH** or completed the attached credit card sheet?
- Included this Checklist with your application?

Date _____

College or University Registrar

Dear Registrar:

Enclosed please find my fee in the amount of \$_____ in payment for a certified transcript of my scholastic record. I attended college during the years _____ to _____. I received my degree on _____. My Social Security number is _____ and my date of birth is _____.

My student identification number was _____.

Please send the transcript ***directly*** to the following address:

NH OPLC - TECHNICAL DIVISION
121 South Fruit Street, Suite 201
Concord, New Hampshire 03301

The Board of Foresters have informed me that they will treat the transcript in accordance with the provisions of the Education Rights Privacy Act and that no unauthorized person will have access to the transcript.

Sincerely,

(Signature)

(Printed Name and Address)

NH OPLC- Technical
121 S Fruit St, Suite 201
CONCORD NH 03301

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Note: This page may be printed or copied on a 3 by 10 label sheet to create mailing labels for use with reference letter envelopes, etc. This setup is for Avery label 5960.

STATE OF NEW HAMPSHIRE
BOARD OF LICENSURE
FOR FORESTERS
121 SOUTH FRUIT STREET, SUITE 201
CONCORD, NH 03301

Dear Reference:

An individual has applied to this board for licensure in the State of New Hampshire as a Forester and either has given your name as a reference or has stated that he/she has worked for you or with you. The Board would appreciate your sending the information requested on the reference form on the following page, and assure you that such information as you give will be treated in the strictest confidence. You may attach additional pages as needed.

This Board is required by law to obtain evidence of the good character of the applicant and his/her qualifications as a professional forester before issuing a certificate of licensure. Statements made on this form by responsible persons with actual knowledge of the applicant's character and qualifications will be considered by the Board as evidence and filed as part of the application.

The Board urges that evidence submitted on this form not be perfunctory, but be considered carefully. The Board, in making its decisions, must rely to a great extent on the evidence submitted by references. Since these decisions may affect the life, health, property and welfare of the public, you have a grave responsibility to provide the Board with a fair and honest appraisal of the applicant.

Since the Board cannot license the applicant until the references are returned, a prompt reply will expedite consideration of the applicant's request for licensure. Please make certain that you enter the applicant's name on the reference form.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Christine Horne', with a stylized flourish at the end.

Christine Horne
Administrative Supervisor

Re: Application of _____

(NAME IS REQUIRED)

THIS IS CONFIDENTIAL INFORMATION - FOR USE OF BOARD MEMBERS ONLY

1. What is your full name _____
(to be typewritten or printed)
2. What is your address _____
(street and number) (city or town)
3. What is your present business or profession? _____

RSA 310-A:99 I. "Forester" means a person who practices forestry.

RSA 310-A:99 II. "Forestry" means the science of silviculture and the practice and art of managing and using for human benefit forestlands and the natural resources that occur in association with forestlands, including trees, other plants, animals, soil, water, and related air and climate.

4. Are you a forester as defined above? _____
5. Are you a licensed forester? _____ In what State? _____ License # _____
6. How long have you known the applicant? From _____ To _____
7. Are you in any way related to the applicant? _____
8. Are you connected with the applicant's current place of employment? _____
9. What has been your association with the applicant? _____
10. Do you know anything reflecting adversely on the integrity or general good character of the applicant?

11. Please describe in detail the applicant's skills as a forester. _____

12. Would you employ the applicant in a position of trust? _____
13. Remarks concerning the applicant _____

I make the above statements with full knowledge that the person referred to is making application for licensure by the State of New Hampshire as a Forester and after having carefully read the information given on the reverse side of this.

Date _____

Written Signature _____

Credit Card Sheets are not accepted via e-mail.

You may pay your fee with a credit card by filling out this form. Please make sure that all information is correct and up to date. Indicate what the fee is for under transaction type.

Fax: 603-271-7928

This page will be destroyed after the transaction has taken place.

Transaction Type:		Amount Due:	
Card Type: (please select one) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard (required)			
Card Number			(required)
Expiration Date:	Month:	Year:	(required)
Billing Name and Address (your billing address must match the address associated with the credit card you are using.)			
Name on Card:			
Billing Address:			
City:			
State/Province:			
Zip/Postal Code:			
Country:			
Authorization Signature :			

**OPTIONAL INFORMATIONAL QUESTION
REGARDING MILITARY EXPERIENCE AND/OR RELATIONSHIP
TO MILITARY PERSONNEL TRANSFERRED TO NEW HAMPSHIRE**

Dear Applicant,

Pursuant to New Hampshire RSA 332-G:7, each board supported by the New Hampshire Office of Professional Licensure and Certification (OPLC) shall:

1. "upon presentation of satisfactory evidence with an application for licensure, certification, or registration, accept education, training, or service completed by an individual as a member of the armed forces, as defined in RSA 21:50, II, toward the qualifications required to receive the license, certificate, or registration in question."

RSA 21:50, II - "Armed forces" means the United States Army, Army Reserve, Navy, Naval Reserve, Marine Corps, Marine Corps Reserve, Air Force, Air Force Reserve, Coast Guard, Coast Guard Reserve, Army National Guard, and the Air National Guard. "Armed forces" also includes other components, but is limited to those components and active duty periods described in 38 C.F.R. 3.7.

OR

2. "Notwithstanding any general or special law to the contrary, each of the boards or commissions under this title authorized to conduct licensure, certification, or registration, and examinations therefor, shall upon the presentation of satisfactory evidence by an applicant before the board or commission, facilitate the issuance of a license or certification for a person: (i) who is certified or licensed in a state other than New Hampshire; (ii) whose spouse is a member of the armed forces in the United States; (iii) whose spouse is the subject of a military transfer to New Hampshire; and (iv) who left employment to accompany a spouse to New Hampshire. The procedure shall include, but not be limited to, facilitating the issuance of a license, certificate, or registration if, in the opinion of the board or commission, the requirements for licensure, certification, or registration of such other state are substantially equivalent to the requirements for licensure, certification, or registration in New Hampshire."

Please place a check mark in all that apply below:

- I **am** eligible for consideration as defined in paragraph #1 above.
- I **am not** eligible for consideration as defined in paragraph #1 above.
- I **am** eligible for consideration as defined in paragraph #2 above.
- I **am not** eligible for consideration as defined in paragraph #2 above