

MISSISSIPPI STATE BOARD OF REGISTRATION FOR FORESTERS

PO Box 1884, Jackson, MS 39215-1884

PH: 601-359-6107 FAX: 601-359-6062 WWW.CFR.MSSTATE.EDU/BORF

APPLICATION FOR LICENSE AS REGISTERED FORESTER

INFORMATION FOR APPLICANTS

All applications for registration must be made on this form and must be typewritten or printed. The registration fee of \$50.00 must accompany this application and both must be filed with the State Board of Registration for Foresters.

Meetings of the Board for the purpose of conducting examination under Section 10 of the Act will be held on dates to be designated by the Board. Applicants will be notified in advance of the examination dates.

Should the Board deny issuance of a license to any applicant, **no portion of the fee will be refunded**, but one re-examination may be given without payment of an additional fee, at the expiration of six (6) months.

A copy of the Foresters Registration Act of 1977 may be found in Mississippi Code 1972, Annotated, Sections 73-36-1 through 73-36-37.

1. GENERAL INFORMATION

(Please Type or Print Clearly)

Name in Full _____
First Middle Last

Birthplace _____ Citizenship _____ Date of Birth _____

Social Security Number _____ (Confidential; State Law)

Residence Address: _____, _____, _____, _____
No., Street or P.O. Box City State Zip Code

Business Address: _____, _____, _____, _____
(Mailing) No, Street or P.O. Box City State Zip Code

Telephone: (H) _____ (W) _____

Cell _____ E-Mail: _____

Present Employer, Position and Title: _____

County of Employment in Mississippi only _____

Have you ever been registered in Mississippi _____ Registration Number: _____

2. REFERENCES

Give names and addresses of five (5) references, not relatives, at least three (3) of whom are registered foresters having personal knowledge of your character and professional reputation. A Board Member can not be used as a reference. (See References Forms)

	Name	Address	Position	RF#
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

3. EDUCATION

Name of institution and date of graduation where your Bachelor of Science Degree was granted.

NOTE: Attach a photocopy of your diploma or transcript to this application)

4. AFFIDAVIT

STATE of _____
ss.

County of _____

_____, being first duly sworn, deposes and says: I the Applicant named in this application, have read the contents hereof, and to the best of my knowledge and belief the forgoing statements are true in substance and effect and are made in good faith and I hereby subscribe to and agree to conform with the Code of Ethics set forth in Section 5.

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, in the year _____.

(SEAL)

Signature of Notary Public

5. CODE OF ETHICS

1. I will strive to be accurate in my knowledge of forestry and will disseminate this knowledge and speak out against the spreading of false or misleading statements concerning forestry.
2. I will advise only in a worthy and truthful manner, refraining from misleading or exaggerated statements concerning what I am prepared to perform.
3. When participating in a public or private fact-finding session, I will base my testimony on adequate knowledge of the subject, and will not withhold data in order to substantiate my point of view.
4. I will perform services of only the highest standards and with complete loyalty to my employer or client and will not voluntarily disclose information about the business affairs of my employer or client which the employer desired to keep confidential.
5. I will provide only the services for which I am qualified by experience or education, and, in practice, will not agree to deviate from accepted professional standards without first advising the employer or client of the expected consequences.
6. I will not obligate myself to a potential employer or client where I have a business interest which might influence their judgment concerning the activity I am expected to carry out.
7. I will not accept compensation for the same service from more than one employer or client without full disclosure and consent of all parties concerned.
8. I will engage or recommend other experts and specialists in forestry or related fields whenever my employer or client will be best served by such action, and will work cooperatively with them.
9. I will aid the Board in keeping persons, unqualified because of lack of good moral character or inadequate training, from being registered.
10. If I have evidence of violation of any of these canons by any Registered Forester, I will present the information to the State Board of Registration for Foresters.
11. I will obligate myself, without reservation, to utilize all of my forestry knowledge and experience for the use, benefit, and betterment of my fellow man and his environment.