## LANDSCAPE MANAGEMENT TECHNICIAN APPRENTICE APPLICATION



## INDIVIDUAL ENROLLMENT FORM

Congratulations on being selected to participate in the Landscape Management Apprenticeship Program™ to advance your career as a landscape professional. We look forward to seeing your progression through the program.

Name	Date of Application
Home Address	
City	State Zip Code
Phone Number	Email Address
EMPLOYER INFORMATION	
Company Name	
Company Address	
City	State Zip Code
Program Contact Person	
Phone Number	Email Address —
PREFERRED METHOD OF CONTACT    Home	Work
<ul> <li>(*not eligible to complete program until proof of graduation,</li> <li>□ Copy of drivers license, government issued ID card,</li> <li>□ Proof of eligibility to work in U.S. if not U.S. citizen</li> <li>□ Name of employer provided mentor and contact info</li> <li>My mentor for the apprenticeship program will be:</li> <li>His/her email address is:</li> </ul>	or birth certificate (must be at least 16 years of age)
Program™ and a fee of \$200 for employees of non-mem complete the program in 24 months, NALP reserves the Please find payment included by check.  □ Please charge □ \$100 (NALP member rate) or □ \$200 (NALP non-member rate) to	Credit Card: USA MASTERCARD AMEX DISCOVER
	Amount to be Charged
	Exp. Date CSC (3 or 4 digit code)
Please submit the completed application to:	Questions?

Landscape Management Apprenticeship Program™ National Association of Landscape Professionals 12500 Fair Lakes Circle, Suite 200

Fairfax, VA 22033

Email: info@landscapeapprenticeship.org

E: info@landscapeapprenticeship.org

P: 800-395-2522