



STATE OF ARKANSAS
BOARD OF REGISTRATION FOR FORESTERS
3821 West Roosevelt Road
LITTLE ROCK, AR 72204
TELEPHONE: (501) 296-1998

To Whom It May Concern:

The following person, _____ of _____
(applicant's name) (county, state)

has applied for a license as a Registered Forester in the State of Arkansas under the provisions of Arkansas Code § 17-31-101 through § 17-31-310. Under the provisions of this code, the applicant is required to furnish evidence satisfactory to the Board that the applicant is qualified to practice forestry. The applicant refers to you as one who has information concerning the applicant's character, ability, reputation, and professional attainments. The Board has the responsibility of registering only those who are qualified to practice forestry in any of its branches, to the end that provisions of this Code, the Board asks your cooperation in providing information about this applicant.

The Board wishes to point out that the statements submitted must be from personal knowledge only. The statements that you make will be taken as deliberate, and made with the full realization of the responsibility toward the public involved. Please answer the questions on the back of this sheet carefully, completely, and with the utmost frankness. We assure you that the information you furnished will be treated by the Board as strictly confidential.

Sincerely,
ARKANSAS BOARD OF REGISTRATION FOR FORESTERS

A handwritten signature in cursive script that reads "Theresa Grimmert".

Theresa Grimmert
Administrative Assistant

RJM/
over

Information concerning _____
(Applicant's Name)

***ANSWERS TO BE GIVEN FROM PERSONAL KNOWLEDGE ONLY**

1. Your name (please print or type) _____
Address _____
(street & number) (city) (state) (Zip code)
2. What is your present business or profession? _____
If forester, your employer _____
3. Are you a graduate Forester? ___ Yes ___ No
4. If a registered forester, what state? _____ License # _____
5. How long have you know the applicant? From _____ to _____
6. Are you in any way related to the applicant? ___ If yes, how? _____
7. What has been your business connection with the applicant? _____
8. Do you know anything reflecting adversely on the applicant's integrity or general good character? ___ No ___ Yes, if yes, please explain. _____
9. What is the applicant's character, reputation, and standing in the community? _____
10. In your opinion is the applicant qualified to have responsibility for forestry work? ___ Yes ___ No If no, please explain. _____
11. Would you employ the applicant in a position of trust? ___ Yes ___ No If no, please explain. _____
12. If the applicant is connected with a firm, partnership, or corporation, please give its name and address. _____
State the position the applicant fills. _____
13. Is the applicant in charge of important forestry work? ___ please explain. _____
14. If the applicant is in private practice, please indicate the nature of such practice. _____
15. Do you recommend the applicant for a license as a registered forester? _____

To the best of my knowledge and belief, I certify that the above statements are true and correct.

(date)

(written signature)

***The board solicits additional information, in letter form, which would amplify or clarify and assist the Board in evaluating the applicant's experience.**
