**ROCKY MOUNTAIN REGIONAL SPECIALTY PACKSTRING**

**“PACKING FOR THE REAL WORLD”**

***PLEASE INCLUDE THIS COMPLETED FORM WITH YOUR REQUEST***

**Federal & State Employees Please Fill Below:**

Name (s):

Organization that you work for:

Job Title:

Address:

Phone Number:

What Would You Like to Learn or Practice?

**Partners & Volunteers Please Fill Below:**

Name (s):

List the Federal or State Agency that is working with your Volunteer Organization:

Agency Contact Person:

Federal or State Agency’s Address & Phone Numbers:

Organizations Address & Phone Numbers:

Organization’s Leader, Phone Number:

Description of your Chapter’s Project or Scheduled Work:

What Would You Like to Learn or Practice?

Will Your Projects Include Working with Youth? If so…Give a Brief Description:

**APPLICATION MUST BE RECEIVED PRIOR TO: APRIL 19, 2014**

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GLENN RYAN

PO BOX 11

SHAWNEE, COLORADO 80475

[gryan@fs.fed.us](mailto:gryan@fs.fed.us)

Reminder: Please no dogs & no personal livestock