



WORKSHOP ROSTER

State Form 54879 (R / 4-19)

DEPARTMENT OF NATURAL RESOURCES
INDIANA MASTER NATURALIST™
JUNIOR INDIANA MASTER NATURALIST



Please fill out this form, and submit by e-mail or mail to IMN State Coordinator (Jody Heaston, 4930 E. State Rd. 201, Bluffton, IN 46714 or E-mail: jheaston@dnr.in.gov) at the end of the workshop. List all those that passed the final exam. Excel lists are accepted.

Location of Workshop: _____

Dates of Workshop (mm/dd/yy): _____

Coordinator(s) of Workshop: _____

Workshop Type: Adults Indiana Master Naturalist Junior Indiana Mater Naturalist

STUDENTS:

Name: _____

Address: _____

Telephone number: _____

E-mail address: _____

Service completed: Data Entry completed (mm/dd/yy) _____

Certificate and Pin Sent: _____

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