

**Notice:** Applications may be submitted at any time. Those received by November 1 will be included in the following year's printed Directory of Foresters. Complete and submit this form to request participation in the Cooperating Forester Program, per NR 1.213, Wis. Admin. Code. Personally identifiable information on this form will be used for Cooperating Forester program administration purposes only, but may be provided to those requesting information under Wisconsin's Open Records laws [ss. 19.31-19.39, Wis. Stats.].

**Please type or print. Complete both sides of this form.**

Name of Forestry Business:	
Name of Business Representative:	
Street or Route (if a PO Box, include a street address for parcel deliveries):	Telephone:
City, State, Zip Code:	Fax Number:
Primary Contact E-mail Address:	Internet Home Page Address:

<p><b>Does Your Business Provide Professional Liability Insurance (check one)?</b></p> <p style="text-align: center;"> <input type="checkbox"/> Insured           <input type="checkbox"/> Not Insured           <input type="checkbox"/> Contact Business For Details       </p> <p><b>Note:</b> Liability insurance is not required to be a Cooperating Forester.</p>
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**Indicate the type of Cooperating Forester:**

- \_\_\_ **CONSULTING FORESTER**  
 A forester who provides a variety of professional forestry services to and represents private landowners on a contract or fee basis that is paid by the landowner.
- \_\_\_ **INDUSTRIAL FORESTER**  
 A forester who, as part of their employment by a wood using industry, provides advice and assistance to private landowners to promote approved forest management practices.

**Foresters to list in the Directory Of Foresters and Post-Secondary Education:** Only foresters meeting eligibility and annual continuing education requirements may be listed. See attached forestry degree requirement definition.

Name of Qualified Forester(s)	Name of School/ Type of Degree	Email:

**Other Personnel to List in The Directory of Foresters**

Name	Job Title

**Organization Memberships**

Professional Organization Memberships (e.g. Association of Consulting Foresters, Society of American Forester, Realtors Associations, Certified Tree Farm Inspector, etc.):


Non-Professional Resource Management Organizations (e.g. Wisconsin Woodland Owners Association, The Nature Conservancy, Sierra Club, etc.):


**Services Offered (check all that apply)**

- |  |  |
|--|--|
| <input type="checkbox"/> 1. Forest management plans                                  | <input type="checkbox"/> 11. Road location and design                    |
| <input type="checkbox"/> 2. Timber sale setup  | <input type="checkbox"/> 12. Logging engineering                         |
| <input type="checkbox"/> 3. Forest inventory and mapping                             | <input type="checkbox"/> 13. Environmental impact studies                |
| <input type="checkbox"/> 4. Appraisals - land, timber, damage or trespass            | <input type="checkbox"/> 14. Expert Testimony for litigation             |
| <input type="checkbox"/> 5. Site preparation with herbicides or mechanical equipment | <input type="checkbox"/> 15. Forest resources and economic studies       |
| <input type="checkbox"/> 6. Tree planting labor                                      | <input type="checkbox"/> 16. Recreation planning and assistance          |
| <input type="checkbox"/> 7. Pesticide application                                    | <input type="checkbox"/> 17. Acquisition and sales of forest lands       |
| <input type="checkbox"/> 8. Timber stand improvement marking or labor                | <input type="checkbox"/> 18. Tax or accounting consultation              |
| <input type="checkbox"/> 9. Christmas tree plantation management                     | <input type="checkbox"/> 19. Arboriculture, urban and community forestry |
| <input type="checkbox"/> 10. Prescribed burning services                             | <input type="checkbox"/> 20. Other (describe below)*                     |

\*

**Qualification Statement (optional)** – Please provide a qualification statement of up to fifty words describing services, qualifications and experiences. The qualification statement will be included in the Directory of Foresters. *Please note: The Department of Natural Resources reserves the right to edit information for inclusion in the Directory of Foresters.*

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**Counties Where Services Are Offered**

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Check each county where service is provided. If services are provided in all counties, check here:  **Statewide**

- |                                     |                                      |                                    |                                      |
|-------------------------------------|--------------------------------------|------------------------------------|--------------------------------------|
| <input type="checkbox"/> ADAMS      | <input type="checkbox"/> FLORENCE    | <input type="checkbox"/> MARATHON  | <input type="checkbox"/> RUSK        |
| <input type="checkbox"/> ASHLAND    | <input type="checkbox"/> FOND DU LAC | <input type="checkbox"/> MARINETTE | <input type="checkbox"/> SAINT CROIX |
| <input type="checkbox"/> BARRON     | <input type="checkbox"/> FOREST      | <input type="checkbox"/> MARQUETTE | <input type="checkbox"/> SAUK        |
| <input type="checkbox"/> BAYFIELD   | <input type="checkbox"/> GRANT       | <input type="checkbox"/> MENOMINEE | <input type="checkbox"/> SAWYER      |
| <input type="checkbox"/> BROWN      | <input type="checkbox"/> GREEN       | <input type="checkbox"/> MILWAUKEE | <input type="checkbox"/> SHAWANO     |
| <input type="checkbox"/> BUFFALO    | <input type="checkbox"/> GREEN LAKE  | <input type="checkbox"/> MONROE    | <input type="checkbox"/> SHEBOYGAN   |
| <input type="checkbox"/> BURNETT    | <input type="checkbox"/> IOWA        | <input type="checkbox"/> OCONTO    | <input type="checkbox"/> TAYLOR      |
| <input type="checkbox"/> CALUMET    | <input type="checkbox"/> IRON        | <input type="checkbox"/> ONEIDA    | <input type="checkbox"/> TREMPLEAU   |
| <input type="checkbox"/> CHIPPEWA   | <input type="checkbox"/> JACKSON     | <input type="checkbox"/> OUTAGAMIE | <input type="checkbox"/> VERNON      |
| <input type="checkbox"/> CLARK      | <input type="checkbox"/> JEFFERSON   | <input type="checkbox"/> OZAUKEE   | <input type="checkbox"/> VILAS       |
| <input type="checkbox"/> COLUMBIA   | <input type="checkbox"/> JUNEAU      | <input type="checkbox"/> PEPIN     | <input type="checkbox"/> WALWORTH    |
| <input type="checkbox"/> CRAWFORD   | <input type="checkbox"/> KENOSHA     | <input type="checkbox"/> PIERCE    | <input type="checkbox"/> WASHBURN    |
| <input type="checkbox"/> DANE       | <input type="checkbox"/> KEWAUNEE    | <input type="checkbox"/> POLK      | <input type="checkbox"/> WASHINGTON  |
| <input type="checkbox"/> DODGE      | <input type="checkbox"/> LA CROSSE   | <input type="checkbox"/> PORTAGE   | <input type="checkbox"/> WAUKESHA    |
| <input type="checkbox"/> DOOR       | <input type="checkbox"/> LAFAYETTE   | <input type="checkbox"/> PRICE     | <input type="checkbox"/> WAUPACA     |
| <input type="checkbox"/> DOUGLAS    | <input type="checkbox"/> LANGLADE    | <input type="checkbox"/> RACINE    | <input type="checkbox"/> WAUSHARA    |
| <input type="checkbox"/> DUNN       | <input type="checkbox"/> LINCOLN     | <input type="checkbox"/> RICHLAND  | <input type="checkbox"/> WINNEBAGO   |
| <input type="checkbox"/> EAU CLAIRE | <input type="checkbox"/> MANITOWOC   | <input type="checkbox"/> ROCK      | <input type="checkbox"/> WOOD        |
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**Signature of Applicant or Business Representative:** I certify that the information on this application is true and correct.

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**Authorized Signature**

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**Date**

## **Eligibility for Consulting and Industrial Foresters – Forestry Degree**

Persons or firms desiring to enter into or continue under a Cooperating Forester Agreement shall meet the requirements as specified in s. [NR 1.213](#), Wis. Adm. Code, the Annual Cooperating Forester Application (Form 2400-096) and Agreement (Form 2400-097). Under the definition in s. [NR 1.21\(2\)\(e\)](#), Wis. Adm. Code, cooperating foresters are required to have "a bachelor's or higher degree in forestry from a school with a curriculum accredited by the Society of American Foresters or an equivalent degree, as determined by the chief state forester." and outlined below.

The criteria for a substantially equivalent degree must include a minimum of eleven courses across four broad areas of study as follows:

### **a. Forest Ecology and Biology**

A minimum of one course in each of the following subject areas:

- Dendrology
- Forest Ecology
- Soils

### **b. Measurement of Forest Resource**

A minimum of one course in each of the following subject areas:

- Forest Measurements
- Sampling Design and Techniques
- Surveying and Mapping

### **c. Management of Forest Resources**

A minimum of one course in each of the following subject areas:

- Forest Management
- Silviculture
- Forest Protection

### **d. Forest Resource Policy and Administration**

A minimum of one course in two of the following subject areas:

- Forest Policy
- Forest Economics
- Business Management

Note: Persons identified as a consulting forester in the Department's consulting forester list as of February 1, 1989, are eligible ("grandfathered") for the Cooperating Forester Program even if they do not meet the educational requirements specified above. If such persons drop off the list because of failure to renew or any other reason, they may not return to the program unless all the current program requirements, including education, are met.