

ALABAMA STATE BOARD OF REGISTRATION FOR FORESTERS

P.O. Box 304500, 513 Madison Avenue, Montgomery, AL 36130-4500

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PHOTO
REQUIRED
(Head &
Shoulders)

RECIPROCIITY REINSTATEMENT APPLICATION

Information for Applicants

All applications for reciprocity reinstatement must be made on this form and must be typewritten or printed. The following items must be submitted at the time of application: 1) proof of U.S. citizenship or legal presence in the U.S. (See lists of acceptable documentation at <http://asbrf.alabama.gov/otherforms.htm>.); 2) proof of education (Graduates with a B.S. degree from a SAF accredited forestry program may submit a copy of their diploma, provided the area of study is shown. All others must have the institution mail an official transcript directly to the Alabama Board of Registration for Foresters at the address listed above.); 3) reinstatement fee of \$300.00 (check or money order made payable to the Alabama Board of Registration for Foresters); 4) continuing education documentation; 5) proof of current forester registration in your resident state; and 6) written explanation of why your previous license lapsed. Notice is hereby given that State Law (*Ala. Code* §30-3-194) requires your social security number for the purpose of administering the State child support program by the State Title IV-D Agency.

The reinstatement fee must accompany this application. Should the Board deny reciprocity reinstatement to any applicant, no portion of the fee will be refunded. Reciprocity reinstatement may be granted by the Board upon certification by the Foresters Registration Board in your resident state that you hold a valid license and have passed an examination. Reciprocity privileges run concurrent with your state license and must be applied for annually or prior to expiration of your license.

IMPORTANT: You must have 10 hours of continuing forestry education (CFE) in the appropriate categories to apply for reinstatement. Please attach your CFE documentation to this application before mailing. (See 380-X-6-.04 of the Board's Administrative Code for CFE requirements.) All laws and rules of the Alabama Board of Registration for Foresters are available at <http://asbrf.alabama.gov>.

1. General Information

Full Name	First	Middle	Last	Suffix
Social Security Number (Required)				
Date of Birth	mm/dd/yyyy	Place of Birth		
Check One	Complete documentation of U.S. citizenship or lawful presence must be attached to this application. (See the lists of acceptable documentation at http://asbrf.alabama.gov/otherforms.htm.			
<input type="checkbox"/> I am a U.S. citizen				
<input type="checkbox"/> I am not a U.S. citizen, but am lawfully present in the U.S.				
<input type="checkbox"/> Other. Explain				
Home Address (Physical Address Required)	Number and Street, City, State, and Zip (POB not acceptable)			County
Area Code/Telephone	Home	Cell	Email Address	
Business Name				
Business Title				
Business Address (Physical Address Required)	Number and Street, City, State, and Zip (POB not acceptable)			County
Area Code/Telephone	Business	Cell	Email Address	
Preferred Mailing Address	Number and Street or POB, City, State, and Zip			County
Name of State Board granting current license				
Registered by Examination?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, how?	
License Number		Expiration Date		
Forestry School from which you graduated				
Degree and Major		Month/Year		
Years of forestry experience following awarding of degree to the present				
Other states where you are registered				

2. Rules of Professional Conduct

The applicant agrees to conform to the following rules of professional conduct:

1. Advertise only in a dignified manner, setting forth the truthful and factual statements for the services one is prepared to render.
2. Strive for correct and increasing knowledge of forestry and the dissemination of this knowledge and will discourage and condemn the spreading of untrue, unfair, and exaggerated statements concerning forestry.
3. When serving as an expert witness on forestry matters, in a public or private fact-finding proceeding, will base testimony on adequate knowledge of the subject matter, and render an opinion based on honest conviction.
4. Refrain from expressing publicly an opinion on a technical subject unless informed as to the facts relating thereto, and will not distort or withhold data of a substantial or other nature for the purpose of substantiating a point of view.
5. Will not voluntarily disclose information concerning business affairs of his principals, clients or employers that they desire to keep confidential, unless express permission is first obtained.
6. Will not, without the full knowledge and consent of his principal, client or employer, have an interest in any business, which may influence judgment in regard to the work for which one is engaged.
7. Will not, for the same service, accept compensation of any kind, other than from his principal, client or employer, without full disclosure, knowledge, and consent of all parties.
8. Will engage, or advise his principal, client or employer to engage other experts and specialists in forestry and related fields whenever the client's or employer's interest would be best served by such actions, and will cooperate freely with them in their work.
9. Will aid in safeguarding against the registration of persons unqualified because of lack of good moral character or of adequate training.
10. If one has substantial and convincing evidence of unprofessional conduct of a registered forester, one will present the information to the State Board of Registration for Foresters.

3. Affidavit

State of _____
County of _____

_____, being first duly sworn, deposes and says: I, the Applicant named in this application, have read the contents hereof and, to the best of my knowledge and belief, the foregoing statements are true in substance and effect and are made in good faith and I hereby subscribe to and agree to conform with the Rules of Professional Conduct set forth in Section 5 above.

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 20 _____.

(Seal)

Signature of Notary Public

My commission expires _____

4. Record of Board

(This space for use only by the Board)

Date application received _____ Amount Paid _____ Control No. _____

Board action with date: _____

Endorsement of Board _____

(Seal)

LICENSE NO. _____