

APPLICATION

2026 Resource Conservation Workshop



INSTRUCTIONS:

1. Fill out the information in the fields below (digitally as a fillable PDF or printed and hand-written).
2. Obtain a letter of recommendation, **emailed directly from recommender** to your Soil and Water Conservation District contact. [Click here to find your district contact.](#)
3. Email this completed document and essay to your district contact by **March 31, 2026**.

APPLICANT INFORMATION

Full Name:
(First, Middle Initial, Last)

Preferred Name:
(optional)

Pronouns:
(optional)

Gender: Man Woman Other: _____
(used for housing and room assignments)

Date of Birth:

Email Address: Cell:

Home Address:
(Street, City, State, Zip code)

County: GPA:
(Unweighted)

School: Grade next year:

How did you learn about
RCW?

EXTRACURRICULAR ACTIVITIES

List and briefly describe your involvement in **up to 5** extracurricular activities that best demonstrate your interest and experience in conservation. These can include clubs, non-profit organizations, volunteer work, contests, jobs, internships, family and community activities, etc.

<u>Activity/Organization:</u>	<u>Duration:</u>	<u>Description:</u>

ESSAY

Attach an essay between 250 and 300 words addressing the three prompts below:

1. *Describe your interest in natural resource conservation – what people, experiences, places, and ideas have inspired you to want to learn more?*
2. *When thinking about the kind of work you want to do in your career, what overall goals do you hope to accomplish?*
3. *What do you hope to gain from attending RCW?*

RECOMMENDATION LETTER

Provide a letter of recommendation from an adult who can speak to your interest and experience in environmental stewardship and/or agriculture. The letter may be written by a teacher, counselor, mentor, or other adult, but may not come from a family member.

The letter should be emailed to a contact from your Soil and Water Conservation District by March 31, 2026.

Recommender Information:

Name: Phone:
Email Address:

GUARDIAN INFORMATION

Primary Guardian: (First contact in case of emergency)

Name: Relationship to student:
Email Address: Cell:
Home Address:
(if different from student) (Street, City, State, Zip code)

Additional Guardian:

Name: Relationship to student:
Email Address: Cell:
Home Address:
(if different from student) (Street, City, State, Zip code)

Student Signature: Date: / /

Guardian Signature: Date: / /