

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: