

APPLICATION FORM for a
SCHOOLYARD HUMMINGBIRD HABITAT
(please print or type)



School Name: _____

School Address: _____

School Phone: _____

School County (circle one): Gaston Mecklenburg York

Contact Person: _____

Contact Person's e-Mail Address: _____

Grade(s) Involved in Project (circle): K 1 2 3 4 5 6 7 8 9 10 11 12

Number of Students Involved: _____ Number of Teachers Involved: _____

Discipline(s) Involved: _____

The signatures below indicate that the building principal and contact person support installation, maintenance, and use of a SCHOOLYARD HUMMINGBIRD HABITAT as a tool for enhancing cross-disciplinary learning among their students.

Principal's Name Principal's Signature Date

Contact Person's Name Contact Person's Signature Date

Attach this form to your cover letter, proposal narrative, and supporting materials and mail unfolded to arrive no later than 5 p.m. on 1 February 2002 at:

Hilton Pond Center for Piedmont Natural History
1432 DeVinney Road
York SC 29745