



Society for Range Management

APPLICATION FOR CERTIFICATION AS A CERTIFIED RANGE MANAGEMENT CONSULTANT (CRMC)

Date of Application _____

Please type or print legibly

Name _____

Mailing Address _____

Business Phone _____ Home Phone _____

Email _____ Internet _____

Birth Date _____ Citizenship _____

Name to be printed on Certificate _____

Are you currently a member of the Society for Range Management? YES NO

Academic Training:

College or University	Major	Degree	Year

(If you do not have a degree in Range Management, submit a separate statement explaining why and how you meet the requirements for academic training and professional experience.)

Describe the nature and diversity of your professional experience, particularly that relating to grazing and its impact on the plant and soil system: (Attach separate sheet, if necessary)

Societies, committees, honors and awards pertinent to this application: (Attach separate sheet, if necessary)

Four (4) or more Letters of Recommendation and a Registrar's Certified Copy of Transcript of Credits should be mailed **directly** to the SRM Headquarters Office, or if included with this application, must be in **original sealed** envelopes.

Names of individuals contacted for Letters of Recommendation:

Please submit **one hard copy and one electronic copy** of this application along with the following documents:

- Five examples of work experience (reports, letters, articles, publications etc.)
- Record of employment and professional activities
- List of publications and consulting reports
- Two relevant publications or reports
- Other documents as requested for applicants with non-range degrees

Fees:	SRM Member	Non-Member
Initial Application:	\$100	\$500
3-Year Renewal	\$75	\$150

Payment Options:

Payment must be made in U.S. funds drawn on a U.S. bank. Please make checks/money orders payable to:

Society for Range Management

Credit Card Payment: ▪ Visa ▪ MC ▪ DISC

Name as it appears on credit card

Card Number

Expiration Date & Security code

Name, Day Time Phone Number and/Zip Code of card holder

The information contained in this application and supporting documents is true to the best of my knowledge.

Signature of Applicant

Mail/email materials to:

**Certified Range Management Consultant
Society for Range Management
8918 W. 21st St. N, Suite 200, #286
Wichita, KS 67205
programs@rangelands.org**