## Kentucky Master Logger Reciprocity Application Form

1.	Name:				
		Last	First	M.I.	
2.	Address:				
	-				
3.	Social Security #:(Optional)				
4.	Telephone (D	aytime):		(Required)	
5.	State from which applicant has received Logger Certification or Training:				
6.	Date certification or training was complete:				
7.	Certification	or I.D. Number:			
8.		Signatu	ıre		

APPLICATION FEE: \$50.00 PER PERSON. Make checks payable to: Kentucky State Treasurer

Mail check with completed form to: Kentucky Division of Forestry; 627 Comanche Trail; Frankfort, KY 40601