

# MAPSS MEMBERSHIP SURVEY

Name \_\_\_\_\_

Company or Affiliation \_\_\_\_\_

Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail : \_\_\_\_\_

MEMBERSHIP STATUS: Full \_\_\_\_\_ Associate \_\_\_\_\_ Student \_\_\_\_\_

(note: the information below will be posted in our membership directory (visit [www.mapss.org](http://www.mapss.org))

Are you a Maine Certified Soil Scientist? \_\_\_ Yes Certification Number \_\_\_\_\_

Are you a USDA-NRCS Soil Scientist? \_\_\_ Yes How long in Maine? \_\_\_\_\_

Are you ARCPAC Certified? \_\_\_ Yes APSS \_\_\_ CPSS \_\_\_ Certification Number \_\_\_\_\_

Other Professional Affiliations: \_\_\_\_\_

## ACADEMIC EXPERIENCE:

Undergraduate Degree(s): \_\_\_\_\_

Year of Graduation and University: \_\_\_\_\_

Graduate Degree(s): \_\_\_\_\_

Year of Graduation and University: \_\_\_\_\_

## AREAS OF EXPERTISE:

\_\_\_ Soil Mapping \_\_\_ Site Evaluation \_\_\_ Soil Fertility \_\_\_ Soil Erosion & Sediment Control

\_\_\_ Soil Chemistry \_\_\_ Soil & Water Conservation \_\_\_ Pedology \_\_\_ Groundwater Hydrology

\_\_\_ Wetland Mapping/Delineation \_\_\_ Wetland Functional Assessment \_\_\_ Land Use Planning

\_\_\_ Hazardous Waste Assessment \_\_\_ Residual Sludge Appl. \_\_\_ Agronomy \_\_\_ Plant Taxonomy

\_\_\_ Surficial Geology \_\_\_ R Geology \_\_\_ Forest Soils \_\_\_ Geog. Info. Systems \_\_\_ AutoCAD

GEOGRAPHIC AVAILABILITY: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\*all full members must be Certified Soil Scientists in Maine, NRCS Soil Scientists in Maine for at least 3 years, or have taught collegiate courses in soil science in Maine and been an associate member for at least 3 years

SIGN AND MAIL THIS FORM TO: David Turcotte  
MAPSS Membership Chair  
15 Hi View Lane  
Corinth ME 04427



