APPLICATION FOR NASM PLAN DEVELOPMENT CERTIFICATE

Under the Nutrient Management Act, 2002

Complete and sign the application form and submit the original by mail or send a scanned version by e-mail.

Please print clearly in ink.

Part 1: Applicant information (Please use your full name as it appears on your government-issued identification)	
Applic	ant Name (full name as it appears on your government issued identification (i.e. driver's licence))
Comp	ny Name (if applicable)
Home	Mailing Address (include 911, RR # and/or P.O. Box #)
 City/T	wn Province Postal Code Telephone
E-mai	Address
Part	: Requirements for Certification
I hav	Completed the required courses: * Introduction to Nutrient Management NASM Plan Developer's How to Prepare a NASM Plan Using NMAN3 Completed the practicum * Passed the NASM Plan Development Certificate exam purses and practicum are not required if you are renewing a valid NASM Plan Development certificate
Part	: Notice of Collection and Use of Personal Information
Univer under and (b the Mi R.S.O	al information is collected under the authority of section 42(2) of the Nutrient Management Act, 2002 (NMA). The information, collected by the ity of Guelph Ridgetown Campus, will be used for administrative purposes, including: (a) the support of the certification and licensing program ne NMA, including future communications, research, training, certification, program development, plan approvals, monitoring and compliance; will be added to an informational database. The information collected will be shared with the Ministry of Agriculture, Food and Rural Affairs and stry of the Environment and Climate Change and may be subject to disclosure under the Freedom of Information and Protection of Privacy Act, 1990, c. F. 31, as amended. If you have any questions or require further information, please contact the Program Manager, Business of the Centre, Ridgetown Campus at 519-674-1500, ext. 63576.
a	es, I would like my name and company made publicly available on the NASM Plan Developers directory www.nutrientmanagement.ca
F	egion you service (fill in only if you want this to appear on the public directory):
Part	: Declaration
I herek	declare that to the best of my knowledge, all information I have provided in this form is complete and accurate. I further hereby declare that I

Applicant Signature Date

have completed the training and testing required for the NASM Plan Development Certificate.

Submit Application to:

Nutrient Management Training

Attention: Janet Nauta

University of Guelph Ridgetown Campus

120 Main Street East Ridgetown ON N0P 2C0 E-mail: rcnman@uoguelph.ca

Telephone: 1-855-648-1444