

**National Garden Clubs, Inc.
Landscape Design Schools**

INSTRUCTOR RESUME AND RECORD

Send one copy to LDS Instructors' Chairman. *Please type or print. Use reverse or attachments if needed.*

NAME _____ **TITLE** _____
(first, initial, last) (eg. Dr.)

Home Address _____ **City** _____

State/Zip _____ **E-mail** _____

Phone () _____ **Fax:** () _____

Work Address _____ **City** _____

State/Zip _____ **E-mail** _____

Phone () _____ **Fax**() _____

SUBJECT(S) FOR WHICH INSTRUCTOR IS BEING ACCREDITED:

- Artistic fundamentals/Design process
- Design development
- Plant selection/Materials/Color/Maintenance
- Private garden/Contemporary design/Redesign
- Public landscapes/Urban design/Conservation areas/Parks, etc.
- History
- Site & graphics evaluation
- Special sites(historic sites, landscapes)
- Landscape design issues

EDUCATION (list degree(s), academic institution(s), year):

Undergraduate: _____

Graduate: _____

Other: _____

Teaching & Lecture Experience:

Publications:

Special Interests:

Would you participate in courses in other states? Yes No

Submitted by: _____
State Chairman, LDS State Garden Club Date

Accredited by: _____
NGC LDS Instructors' Chairman Date