



National Garden Clubs, Inc.
Environmental, Gardening and Landscape Design Schools
APPLICATION FOR CONSULTANT REINSTATEMENT

Reinstatement
Application
Form 10-2020

Check appropriate School: Environmental School Gardening School Landscape Design School

NOTE: Application must be within two years of certificate lapse.

Name of Applicant Last name First name

Street Address or P.O. Box

City/State Zip Code +4

Email Phone

Applicant's Garden Club State Garden Club

I am applying for reinstatement as a Consultant. My last expired Certificate is dated and was earned in the state of Good Standing Date Expired

Applicant Signature Date

State ES, GS or LDS Chairman

Approved by Signature of State ES, GS or LDS Chairman Date

NGC ES, GS or LDS Accrediting Chairman

Approved by Signature of Appropriate NGC Schools Accrediting Chairman Date

I am applying for reinstatement. I have attended two courses. Date of completion

- Series # Course taken: Course 1 Course 2 Course 3 Course 4
Location (City/State) Dates
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Applicant Signature Date

State ES, GS or LDS Chairman

Approved by Signature of State ES, GS or LDS Chairman Date

NGC ES, GS or LDS Accrediting Chairman

Approved by Signature of Appropriate NGC Schools Accrediting Chairman Date

- Date of Certificate
Date sent to NGC Headquarters
Date Confirmation Received from NGC Headquarters