##### **INTERNATIONAL HUNTER EDUCATION ASSOCIATION - USA**

**GALLERY OF GUNS**

***"CHAMPIONS OF HUNTER EDUCATION"***

**HUNTER EDUCATION STUDENT ESSAY**

### Nomination Form

#### AWARD QUALIFICATION - DEADLINE APRIL 1, 2016

Two **hunter education students** (high school juniors or seniors at the time of the deadline date) will be selected from those who have submitted a **200-WORD** essay to the IHEA-USA on the following topic:

*Now that you have completed a hunter education course* ...**"What do you feel is the best way to reach new hunters and or shooting sports enthusiasts in the future?"**

A ***Gallery of Guns*** **$2,500** **‘Future Leader in Conservation’ Scholastic Scholarship** will be awarded to two high school juniors/seniors -- **hunter education students** -- from a pool of essays submitted to IHEA-USA in 2015/16. Student must submit 1) copy of Hunter Education certification card (must be completed prior to submission), 2) copy of current report card, and 3) biography -- along with his/her essay. Under ***Gallery of Guns***, the name of his/her Hunter Education Instructor will also be recognized. Submitted essays will be reviewed by **IHEA-USA's Instructor Advisory Committee** for selection. Selected essays will be forwarded to the Publisher of the *Hunter's Handbook* for inclusion in the annual issue distributed around May/June 2016.

**Student’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent's Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alt. Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT EMAIL ADDRESS (Parent/Family) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State \_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HE Instructor** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

INSTRUCTOR CONTACT EMAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature/Consent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Parent Signature/Consent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_