

Environmental Challenge Interest Form

Delaware Valley Chapter of the Air & Waste Management Association

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
Major/Area of Study (Students only) Title/Position (Faculty & Professionals only)	

Participation/Interests

What will be your role in the Environmental Competition (check all that apply)?

____ Student If Student, do you have any other tentative team members? Y/N If yes please list tentative members.

____ Faculty Sponsor

- Professional/Faculty Judge
- ____ Professional/Faculty Competition Advisor-Mentor
- ____ Professional/Faculty Event Planning

Professionals/Faculty Skills or Background (optional)

Summarize special any skills and areas of specialty that you would be willing to help share.