

# TREE CITY USA® GROWTH AWARD APPLICATION



Mail completed application with requested attachments to your state forester or apply online at [portal.arborday.org](http://portal.arborday.org). Please contact your State Urban Forestry Coordinator for your state's deadline, mailing address and any additional information required by your state. The common deadline is December 31 but can vary by state.

## Application Instructions

- Community must have been certified as a Tree City USA for at least one previous year and submitted a recertification application this year.
- Community must earn 10 points according to Growth Award Eligible Activities – which were new or significantly improved in 2020.
- Attach documentation for each eligible activity listed below. Appropriate documentation includes narrative descriptions, copies of documents, copies of printed brochures, and newspaper clippings.
- For a list of eligible activities, visit <https://www.arborday.org/growth-award/>.

Community Name (as it should appear on recognition materials) \_\_\_\_\_

## City Forestry Contact: Person who is responsible for completing and answering questions about this application.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Professional Title \_\_\_\_\_

Address \_\_\_\_\_

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

Email Address \_\_\_\_\_

Phone Number (ex. 402-473-9553) \_\_\_\_\_

Activity #	Name of Eligible Activity	# of Points Earned	Describe how activity was achieved
<input type="checkbox"/> Documentation attached			

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→ Total Points (including points from reverse side):

*Additional spaces on back if needed.*

## Growth Award Application Certification To Be Completed By The State Forester:

Community: \_\_\_\_\_

The above named community has made formal application to this office. I am pleased to advise you that we reviewed the application and have concluded that, based on the information contained herein, said community is eligible to receive the Tree City USA Growth Award, having in my opinion met the Growth Award criteria specified in this application.

State Forester Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_



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