



APPLICATION FOR FALCONRY EXAMINATION

Upon completion, submit this application to Heidi Cyr, Falconry Coordinator, at heidi.cyr@state.mn.us or MN DNR, Division of Ecological & Water Resources, 500 Lafayette Road, Box 25, St. Paul, MN 55155-4025 or fax: 651-296-1811.

NAME _____

ADDRESS _____

PHONE _____

EMAIL _____

DATE OF BIRTH _____

(Applicant must be 12 years of age or over)

1. If you previously possessed a valid falconry permit from Minnesota or other state as approved by the U.S. Fish and Wildlife Service, please provide a copy of the last permit issued to you.

2. Have you ever been denied a state permit of any kind? _____ If so, please explain.

3. Do you have any experience with raptors? If so, how many months/years of experience have you had in keeping/maintaining/training a raptor? _____

For who and in what capacity? _____

4. Do you already have a MN falconer willing to act as your sponsor? _____

If so, who? _____