



# GREEN GLOBES / GUIDING PRINCIPLES COMPLIANCE FELLOW APPLICATION



Name:

Title:

Company:

Email:

Phone:

Applying for: Green Globes Fellow [  ]      Guiding Principles Compliance Fellow [  ]

Number of years as a GGP / GPCP:

Are you licensed by a government entity for Architecture or Engineering?

Yes [  ]    No [  ]

If so, please indicate your licensure:

## Completed Projects

Please include the below information for each Green Globes or Guiding Principles Compliance project. The Green Globes Fellow and Guiding Principles Compliance Fellow program requires a minimum of 10 successfully completed Green Globes or Guiding Principles Compliance projects.

### Completed Project 1:

Project Name:

Project Location:

Certification/Verification Date:

Project Description:

Role:

### Completed Project 2:

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:





# GREEN GLOBES / GUIDING PRINCIPLES COMPLIANCE FELLOW APPLICATION



Role:

**Completed Project 3:**

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:

**Completed Project 4:**

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:

**Completed Project 5:**

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:

**Completed Project 6:**

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:





# GREEN GLOBES / GUIDING PRINCIPLES COMPLIANCE FELLOW APPLICATION



## Completed Project 7:

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:

## Completed Project 8:

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:

## Completed Project 9:

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:

## Completed Project 10:

Project Name:

Project Location:

Certification/ Verification Date:

Project Description:

Role:





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## Sponsors

Please include the below contact information for each project sponsor as well as written testimonials on each sponsor's letterhead. GBI will contact each sponsor to confirm reference and testimonial.

### Sponsor 1:

Name:

Title:

Organization:

Phone:

Email:

### Sponsor 2:

Name:

Title:

Organization:

Phone:

Email:

### Sponsor 3:

Name:

Title:

Organization:

Phone:

Email:

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[ ] I hereby declare that the information provided is true and correct. I understand that any willful dishonesty will result in denial of this application.

Signature:

Date:

