

MAINE DEPARTMENT OF INLAND FISHERIES AND WILDLIFE

284 State Street, 41 SHS Augusta, ME 04333

Phone 207-287-5252/Fax 207-287-6395

**Certification for 100-Hour Training Requirements to Become a
Wildlife Rehabilitator**

In accordance with the provisions of the Revised Statutes, Title 12, Section 12152, 5, and MDIFW Chapter 7 rules on Wildlife in Captivity, the following document shall be submitted as part of the requirements to apply for a permit that allows me to rehabilitate wildlife native to the State of Maine.

Name of Applicant: _____
(Please Print)

1. Do you possess a degree in Captive Wildlife Care, Biological Sciences, Veterinary Technician Training, or a related field? Yes or No

Degree Type: Veterinary Tech Certification Associate (A.S. or A.A.S) Bachelor (B.S.)
 Master (M.S.) Other: _____

Graduation Date: _____ **Major Course of Study:** _____

Institution Name: _____

Institution Address: _____
(P.O. Box/Street/Apt#) (City/Town) (Zip Code)

Description of pertinent course work demonstrating experience in care, feeding, handling, and rehabilitation of animals: _____

2. Have you participated in an Apprenticeship Program with an Approved Rehabilitation Facility(s)?
 Yes or No

Dates of Activity: _____ **Total Number of Hours:** _____

Facility Name: _____ **Permit #:** _____

Facility Address: _____
(P.O. Box/Street/Apt#) (City/Town) (Zip Code)

Description of pertinent work duties demonstrating experience in care, feeding, handling, and rehabilitation of native wildlife species: _____

2.(con't) I hereby attest that the applicant has completed the above work and total hours at our facility:

Facility Manager/Permittee: _____
(Please Print)

Email Address: _____ Phone Number: (____) _____

Manager Signature: _____ Date: _____

3. Have you worked or volunteered at a Veterinary Clinic, Animal Shelter, or Zoo? Yes OR No

Dates of Activity: _____ Total Number of Hours: _____

Clinic/Shelter Name: _____

Clinic/Shelter Address: _____
(P.O. Box/Street/Apt#) (City/Town) (Zip Code)

Description of pertinent work duties demonstrating experience in care, feeding, handling, and rehabilitation of animals that relates to rehabilitation of native wildlife species: _____

I hereby attest that the applicant has completed the above work and total hours at our facility:

Supervisor Name: _____
(Please Print)

Email Address: _____ Phone Number: (____) _____

Supervisor Signature: _____ Date: _____

4. Do you have any other work or volunteer experience that has provided you training and/or experience as it relates to the rehabilitation of wildlife? Yes OR No

Dates of Activity: _____ Total Number of Hours: _____

Where was this experience obtained: _____

Address: _____
(P.O. Box/Street/Apt#) (City/Town) (Zip Code)

4.(con't) Description of pertinent work duties demonstrating experience as it relates to the care, feeding, handling, and rehabilitation of native wildlife species: _____

I hereby attest that the applicant has completed the above work and total hours at our facility:

Name of Supervising Individual: _____

(Please Print)

Email Address: _____

Phone Number: () _____

Signature: _____

Date: _____

Applicant Certification:

BY AFFIXING YOUR SIGNATURE BELOW, YOU:

- A. Certify that all statements made herein, and any documents you make hereof, are true and correct.
- B. Certify that you understand that any false statement made in this application or any documents you made a part thereof may result in denial of, or revocation of your Wildlife Rehabilitation Permit.

Applicant Signature: _____

Date: _____

FOR DEPARTMENT USE ONLY	
Approved or Denied By: _____	Date: _____
Total number of qualified hours: _____	
Additional Notes: _____	

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Certification for 100-Hour Training Requirements - Form Instructions

Applicants for a Wildlife Rehabilitation Permit are required to document the successful completion of the training requirements to become a permitted Wildlife Rehabilitator. ***Please note that the combination of training and experience must add up to 100 total hours.***

This form must be filled out completely, signed, and submitted with your application for a Wildlife Rehabilitation Permit.

Please use additional sheets if necessary. It is important that you adequately describe your training and experience in order to be evaluated for credit in each category. Please label additional sheets with the category you are describing.

Category 1. This section pertains to degrees or certifications obtained from accredited institutions of higher learning. A Bachelor of Science or higher degree in a relevant biological science may be substituted for up to 50-hours toward the hourly training requirement. Hourly credit may be applied at a lower rate for an Associate Degree or veterinary technician certification. It is important that you adequately describe your pertinent course work and experiential learning in the care, feeding, and handling of wild animals in order to be given the appropriate hourly credit.

Category 2. This section is provided for you to document formal training and experiential learning from an apprenticeship program with an Approved Wildlife Rehabilitation Facility(s). It is important that you adequately describe your pertinent work duties and experience in the care, feeding, and handling of wild animals in order to be given the appropriate hourly credit. If you are claiming experience in this category, it is important that you have the center manager's signature on this form. If you have any questions regarding what constitutes an Approved Wildlife Rehabilitation Center, please contact the Dept. at 207-287-5252 prior to submitting your application materials. In addition to the information on this form, an approved facility will have a formal evaluation form to be submitted directly by the facility manager.

Category 3. This section is provided for you to document any work or volunteer experience at a veterinary clinic, animal shelter or zoo. Please adequately describe your pertinent work duties and experience as it relates to the care, feeding, and handling of animals. Please note that in order to get hourly credit in this category, your experience at these facilities must be directly applicable to aspects of wildlife rehabilitation as it pertains to the species you are requesting to be permitted to rehabilitate. Your experience doesn't have to directly involve wildlife species native to Maine, but the experience must be applicable to skills necessary for native wildlife rehabilitation. If you are claiming experience in this category, it is important that you have your supervisor's signature on this form.

Category 4. This section allows you to claim hourly credit for any other experience(s) you possess that you feel is pertinent to the rehabilitation of the wildlife species you are requesting to be permitted to rehabilitate. Please thoroughly describe your work or volunteer experience as it relates to the care, feeding, and handling of animals, in order to get hourly credits in this category. Again, your experience in this category doesn't have to directly involve wildlife species native to Maine, but the experience must be applicable to skills necessary for native wildlife rehabilitation.

Please submit this form with your Application for Wildlife Rehabilitation Form and other supporting documents to:

Maine Department of Inland Fisheries and Wildlife
ATTN: Wildlife Rehabilitation Permits
41 State House Station
Augusta, ME 04333-0041
or via email to: Rehab.IFW@maine.gov