

Falconry Apprentice License Exam

Registration Form

For more information on this license visit www.dec.ny.gov/permits/28632.html

Complete the form below to register for the Falconry Apprentice License Examination being offered in August 2020. After receiving your registration, DEC will mail you information regarding the location and time of the exam. Study materials are available on the [Falconry License webpage](#). Note: Registrants should refer to the press release which lists the date for the exam and the date the registration is due. Exams are FREE to take.

*APPLICANT INFORMATION

name / date of birth	Last _____ First _____ M.I. _____ DOB (mm/dd/yyyy) _____				There is no age limit for taking this exam, however, you must be 14 years old to apply for the license.
	address				
address	Street Address _____		Apartment/Unit _____	City _____	
	County _____			State _____	Zip Code _____
email / telephone	Email _____				(_____) _____ - _____ Telephone

EXAMINATION LOCATION

EXAM TIME

In order of preference, list the DEC region number and city location where you would like to take the examination. NOTE: For Regions 1 and 3, you must also select the date you would like to take the exam.		NOTE: Exams will be offered in Region 1 from 10AM to 12PM (noon) ONLY.
FIRST PREFERENCE		
SECOND PREFERENCE		

LIST OF DEC REGIONAL OFFICES & CITY EXAM DATES AND TIMES

Region 1 Stony Brook - Aug 7 2020 (10-12)	Region 4 – Schenectady - (10-12) OR (2-4)	Region 7 – Cortland - (10-12) OR (2-4)
Region 1 Stony Brook- Aug 14, 2020 (10-12)	Region 4 – Stamford - (10-12) OR (2-4)	Region 8 – Avon - (10-12) OR (2-4)
Region 2 – Long Island City - (10-12) OR (2-4)	Region 5 – Ray Brook - (10-12) OR (2-4)	Region 9 – Buffalo - (10-12) OR (2-4)
Region 3 New Paltz - Aug 7, 2020 (10-12) OR (2-4)	Region 5 – Warrensburg - (10-12) OR (2-4)	Region 9 – Allegany - (10-12) OR (2-4)
Region 3 New Paltz - Aug 14, 2020 (10-12) OR (2-4)	Region 6 – Watertown - (10-12) OR (2-4)	
	Region 6 – Utica - (10-12) OR (2-4)	

You will be notified prior to the exam date as to which location you will be taking the exam Please be sure to choose two different locations. Our regional offices can hold a certain amount of individuals. If your first choice is full, you will be placed in your second choice.

SPECIAL ACCOMMODATIONS

<p>please let us know if you require any special accommodation due to disability. indicate the nature of accommodations needed in the space to the right, or on a separate page</p>	
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MAIL YOUR COMPLETED APPLICATION TO:

NYS Department of Environmental Conservation
Special Licenses Unit · 5th Floor
625 Broadway · Albany, New York 12233

For questions or concerns, please contact us
Phone: (518) 402-8985 · Fax: (518) 402-8925
Email: SpecialLicenses@dec.ny.gov
Website: www.dec.ny.gov/63.html