NORTH CAROLINA WILDLIFE RESOURCES COMMISSION

Wildlife Rehabilitation Mentor Agreement Form

Apprentice Name			Telephone Number
	Address		
City	State	Zip Code	
provide professional	assistance in wildlife re	ehabilitation. I understand I n	in wildlife rehabilitation and will be available to nust have had my wildlife rehabilitation for two or possess baby squirrels, opossums, and bunnies.
Mentor's Name		Mentor's Signature	Rehabilitation License Number
Mentor's Address			() Telephone Number
City, State Zip Code			relephone (vulnoe)