

## **Instructor Background And Information Form**

Thank you for filling out this form.			
Presentation Title: Water Reuse f	or Preservation of Urban	Greenspaces	
	Title: Parks Supervisor		
Employer: City of Tigard	Address: 13125 SW Hall Blvd.  State: OR Zip: 97223 Phone: 503 718 2598		
City: Tigard	State: OR	97223 Zip:	Phone: 503 718 2598
Summary of Lesson content:	sent the 24 year history of	using recycled v	vater to irrigate athletic fields and ornamental
-			e, and public perception of recycled water use
Please be sure the resume include Use the reverse side of this form	des all requested informat if more room is needed to see related to presentation:	ion. Qualification fully answer the 28 years as a par	ks maintenance professional - 16 years
			cience/Public Admin, Oregon State University
Professional Registration/Certific	ation: Public Pesticides A	pplicator, Certifie	d Pool Operator, Certified Playground Safety
Related papers/instruction you ha	ave presented:		
Title:	Date:	Event: _	
Professional Organizations/Activities: Oregon Recreation and Parks Association - member			Date:
			Date:
Course sponsor: Clean Water Se	rvices		
	Martin Mck	right	Date:6/3/2025
DO NOT WRITE BELOW THIS LIN	E	1005555555555555555555	
Date Evaluated:	By:		Approved: Yes No

Return Completed Form To:

OESAC CEU COMMITTEE

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