## The Oregon GCSA Oregon State University Turfgrass Management Application Form

Please type this form

Section 1 – Applicant Informa	
Name <u>Ian Thomas Condon</u>	Date 09/112024
Club: King City Golf Course	
Preferred Mailing (Club or home) Address	
3004 Lindquist Ct.	
City Newberg	State OR Zip _ 97132
Cell Phone ( ) <u>503-949-4775</u>	Email condonian@hotmail.com
GCSA Member	tion if applicant is not an Oregon
Section 2 –Employer informate GCSA Member  Name of MemberJeff Halfman OGCSA  Club: _ King City Golf Course	
GCSA Member  Name of Member Jeff Halfman OGCSA	
GCSA Member  Name of MemberJeff Halfman OGCSA  Club:King City Golf Course	A A022191 GCSA 168526

List in chronological order work history in related turfgrass industry

Type of work	Employer	Employment dates
Greenskeeper	King City Golf Course	May 2024 to Present
Greenskeeper	Chehalem Glenn Golf Course	2015 Seasonal position
Greenskeeper	Oswego Lake Country Club	2001 Seasonal position
Greenskeeper	The Dalles Country Club	1998 & 1999 Seasonal position
Greenskeeper	Horn Rapids Golf Course	1996 Seasonal position

List your activities outside of work (clubs, organizations, community service, etc.):	
In my off duty time I enjoy golfing, disc golf, fishing and hunting.	
=	

## Section 4 - Applicant Letter of Interest

Attach a typed letter of interest that does not exceed 500 words. The letter of interest must be original and not previously submitted to Oregon GCSA. The letter should cover the following:

1. Why are you interested in completing the Oregon State University (OSU) Turfgrass Management PACE course and how will assist you in your career in the industry?

## Section 5 - Oregon GCSA Member letter of recommendation

Non-Oregon GCSA members: Attach a letter of recommendation from sponsoring Oregon GCSA member. The letter of recommendation must be composed on official letterhead, dated and signed. The letter of recommendation must be original and not previously submitted to Oregon GCSA.

Oregon GCSA Members: Attach a letter of recommendation from an industry peer, club management or club member.

Certification	
I certify that the above information is true and correct to	o the best of my knowledge.
Van Card	09/112024
(Applicant's Signature)	(Date)

(Date)