



MIDWEST AQUATIC PLANT MANAGEMENT SOCIETY

www.mapms.org

2018 MIDWEST AQUATIC PLANT MANAGEMENT SOCIETY ROBERT L. JOHNSON RESEARCH GRANT APPLICATION FORM (Application form is due by February 1st, 2018)

GENERAL INSTRUCTIONS: Answer all questions to the best of your ability and follow instructions completely. Be careful not to duplicate your responses. The selection of research grant recipient will be influenced by the completeness of replies, neatness, and legibility. Please type or print, using black ink.

PERSONAL INFORMATION

Name: _____ SSN#: _____

Permanent Mailing Address: _____
Number & Street

City State Zip Code E-mail: _____

Telephone #: (____) _____

Date of Birth: _____ U.S. Citizen: ____ (Y or N)

Year in School: ____ HS or College Circle One

Name of Local Newspaper: _____

Newspaper Address: _____
Number & Street City State Zip Code

COLLEGE OR UNIVERSITY INFORMATION

College or University Attending: _____

School or Department: _____

Name of Professor or person supervising research: _____

Address of research supervisor: _____
Number & Street City State Zip Code

Phone: (____) _____ E-Mail: _____

Title of research: _____

ATTACH COPY OF YOUR RESEARCH PROPOSAL TO THIS APPLICATION



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APPLICANT'S CERTIFICATION AND PERMISSION TO RELEASE INFORMATION

I hereby certify that all information submitted on this application is true and accurate to the best of my knowledge. I understand that submitting non-factual information will automatically disqualify me from any consideration for a scholarship.

By submitting this application, I authorize my high school principal or counselor to make available to the Midwest Aquatic Plant Management Society information concerning my academic records.

[] Yes [] No

Applicant's Signature: _____ Date: _____

PROFESSOR OR SUPERVISOR CERTIFICATION

I hereby certify that the academic information and proposal as submitted on this application are correct, and that the applicant meets all eligibility requirements as outlined herein.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

College or University: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: (_____) _____

Please send a Physical and Electronic copy to:

Physical copy:
Midwest Aquatic Plant Management Society, Inc.
Robert L. Johnson Memorial Research Grant
P.O. Box 100
Seymour, IN 47274

Electronic copy:
Dr. Ryan Thum
ryan.thum@montana.edu
Subject: Robert L Johnson Memorial Research Grant Application



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REGULATIONS

1. This research grant must be used to pursue a course of study leading to a degree in aquatic plant management or related field at any accredited university or college in North America or may be independent research which contributes to the mission of the Society.
2. Research grant funds may only be used for tuition, fees, books and supplies, equipment or testing materials necessary for the completion of the proposed research.
3. The research grant stipend will be sent to the recipient at the beginning of the school year for which it is awarded but need not be totally used in that year. Funds will be made payable as directed by certifying professor.
4. Other awards may be accepted by recipients of this grant.
5. A research grant recipient who fails to commence work on the project in the academic year of his or her award will normally forfeit the grant. One who withdraws from college and does not transfer to another accredited institution to continue the same research or discontinues work on the project will normally forfeit the unused portion of his or her award.
6. Any change in status or address must be reported to the Secretary of Midwest Aquatic Plant Management Society within 30 days of any such changes.
7. The Midwest Aquatic Plant Management Society will award research grants solely on the basis of merit without regard to race, religion, or national origin. One or more research grants may be awarded annually based on funds available. The maximum aggregate amount of the grant(s) shall be \$10,000 per year.
8. The recipient of a MAPMS Research Grant shall be required to present updates or results of the research project at the next annual meeting following award of the grant. Room and full registration at the annual meeting will be provided by the Society.
9. The Midwest Aquatic Plant Management Society reserves the right to make changes to the grant program as required. Any changes will be posted on MAPMS.org and will be communicated to anyone who can provide a submission.

THE MIDWEST AQUATIC PLANT MANAGEMENT SOCIETY, INC. (MAPMS) is a not-for-profit professional organization established in 1980. MAPMS is dedicated to promoting the management of aquatic vegetation, to provide for the scientific and educational advancement of members, to encourage scientific research, to promote an exchange of information among members, and to extend and develop public interest in the discipline. Membership consists of licensed aquatic pesticide applicators, private consultants, university and college research and teaching professionals and students, government administrators and research personnel, company sales representatives and research personnel from manufacturers and distributors of herbicides, harvesters, and other equipment used in the industry. Membership is open to any person who is interested in the advancement of the Society and its goals. The membership represents 20 states and the District of Columbia, Canada, and England. For further information about MAPMS, contact:

Midwest Aquatic Plant Management Society
P.O. Box 100
Seymour, IN 47274
Mapms.org