

**Scholarship Application**

Top of Form

The Society of Lake Management professionals (SLMP) is seeking applications for its annual Student Scholarship Award. SLMP intends to award $3,500 in scholarships to the successful applicants at the January 2020 SLMP Summit that will take place January 20- 23, 2020 in St. Petersburg, Florida.

Scholarship funds are provided directly to the student and may be used by the recipient to cover costs associated with education and research expenses. Eligible applicants must be enrolled as full-time undergraduate or graduate students in an accredited college or university in the United States. Coursework or research in an area related to water quality, aquatic plant management, fisheries management, or aquatic ecology of impounded waters is required.

Applications must be received no later than November 1, 2019 and will be evaluated based on relevant college GPA, quality and relevance of coursework or research, a proposed budget, information obtained from references, and other related considerations. The successful applicant will be required to attend the Summit in January 2020 and present an oral report on research activities.

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 scholarship recipient will be influenced by the completeness of replies, neatness, and legibility.

Please type or print, using black ink.

PERSONAL INFORMATION

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Number & Street

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code

E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone #: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ U.S. Citizen: \_\_\_ (Y or N)

COLLEGE OR UNIVERSITY INFORMATION

College or University Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School or Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current GPA\_\_\_\_\_\_ Year in College or University: \_\_\_\_\_

Name of Professor supervising research: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of research Professor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number & Street City State Zip Code

Phone: (\_\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of research: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ATTACH COPY OF YOUR RESEARCH AND BUDGET PROPOSAL

TO THIS APPLICATION

BRIEF DISCUSSION OF WHY YOU SHOULD BE AWARDED THE SCHOLARSHIP.

(Use additional pages if necessary)

PROFESSOR 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: (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFERENCES

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REGULATIONS

1. This SLMP scholarship must be used to pursue a course of study leading to a degree in associated with lake management such as water quality, aquatic plant management, fisheries management, aquatic ecology 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. SLMP scholarship funds may only be used for tuition, fees, books and supplies, equipment or testing materials necessary for the completion of the proposed research.

3. Other awards may be accepted by recipients of this scholarship.

4. A SLMP scholarship 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.

5. Any change in status or address must be reported to the Secretary of Society of Lake Management Professionals within 30 days of any such changes.

6. The Society of Lake Management Professionals will award SLMP scholarships solely on the basis of merit without regard to race, religion, or national origin. One or more SLMP scholarships may be awarded annually based on funds available.

7. The recipient of a SLMP scholarship 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.

8. The Society of Lake Management Professionals reserves the right to makes changes to the grant program as required. Any changes will be posted on http://lakeprofessionals.org and will be communicated to anyone who can provided a submission.

APPLICATION SUBMISSION

Submit complete application and attachments via email to slmp.ed@flepms.org no later than November 1, 2019