



The Florida Chapter of The Wildlife Society and  
Florida Exotic Pest Plant Council's 2012 Spring Conference



APPLICATION FOR PARTIAL TRAVEL GRANT TO THE 2012 FLTWS-FLEPPC CONFERENCE

The intent of these grants are to facilitate the attendance of FLTWS and FLEPPC members to this years conference, who would not otherwise be able to attend. The grants will not cover the full cost of conference attendance; applicants will still be required to pay for a portion of their costs. Grants are either for a 1 or 2-night hotel stay (double occupancy), or a reduced conference registration rate of \$75. Number of grants rewarded will be determined based on available funds, number of applications received, and amount requested per application (1 or 2-nights, or \$75 registration). Preference will be given to applicants who have a history of dedicated service to FLTWS or FLEPPC.

**Eligibility:**

- Must be a current member of The Florida Chapter of The Wildlife Society or Florida Exotic Pest Plant Council.
- Cannot be receiving any funding from their employer for their attendance (exception: participants will not be excluded if employer is allowing attendance to count as work hours).
- Must be received by March 15, 2012 (applicants will be notified by March 29<sup>th</sup>).

**Applicant Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
 \_\_\_\_\_  
City State ZIP Code

Phone: (    )                      E-mail Address: \_\_\_\_\_

Affiliation (If Any): \_\_\_\_\_

Are you a member of FLTWS or FLEPPC?      YES       NO       If yes, for how many years?

Are you currently or have you previously served on the board of FLTWS or FLEPPC?      YES       NO       If yes, for how many years?

Have you been involved with the planning of this year's conference?      YES       NO       If Yes, explain:

Will you be volunteering at the conference?      YES       NO       If Yes, explain:

What are you requesting?      1-hotel night       2-hotel nights       \$75 Registration

Additional information you would like to share:

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email, Fax, or mail this application to:

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 3860 Tollgate Blvd., Ste 300  
 Naples, FL 34114  
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