**Minnesota Chapter of The Wildlife Society**

**Application for Student Professional**

**Development Grants**

The Minnesota Chapter of The Wildlife Society (MNTWS) will award up to $2000 annually in student professional development grants to encourage participation in professional workshops, conferences, continuing education, and volunteer opportunities. These funds can be used towards transportation, lodging, and registration. Individual travel grant requests are limited to $250 and student group requests are limited to $500.

To be eligible, individuals must be:

1. a **current** member of MNTWS- [http://wildlife.org/mn/membership](http://wildlife.org/mn/membership%20) If applying as a **student group**, you must list 5 other MNTWS student members participating in the event. If your group has less than 5 people participating they must all be registered MNTWS members.
2. a current undergraduate or graduate student seeking a natural resources related degree at a Minnesota institution
3. willing to submit a newsletter article about their experience

Applicants must submit the following items:

1. A completed application form- see below
2. An abstract of paper or poster (if presenting)

Applicants must submit all required information in order to be considered for travel assistance.Applications should be submitted at least 30 days in advance of attending an event. The application must clearly state the amount of support requested and identify how costs will be incurred. Grants will be awarded tri-annually, once in December (deadline to apply **Dec. 1st**), once in May (deadline to apply **May 1st**), and once in August (deadline to apply **Aug 1st**). Award checks will be mailed to successful applicants within 30 days of the application deadline. Grants will be awarded based on benefit to the student(s), benefit to the Minnesota Chapter, and financial need. Priority will be given to students presenting a paper or poster when submitting requests to attend conferences.

**Applications and all requested materials should be submitted with the following title in the e-mail subject line “yourlastname\_SPDGapplication\_year” & sent to the MNTWS Student Relations Committee at** mntws.src@gmail.com

Questions about the Student Professional Development Grant process or application can be sent to the MNTWS Student Relations Committee Chair, Jennifer Boucher, at dubay013@umn.edu

**MN TWS Student Professional Development Grant**

**Application Form**

Request Type: Choose an item. Number of students attending: 1[ ]  2[ ]  3[ ]  4[ ]  5+[ ]

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First Name Last Name

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Mailing Address

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City, State, Zip Code

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Email Phone

**If applying as a group, please list (first & last names) up to 5 other TWS student members attending the event with you.**

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Have you received a grant in the past from MNTWS? Choose an item.

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Who should the awards check be made out to?

**Mailing address of where award check should be sent:**

Address is the same as above [ ]

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Mailing Address

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City, State, Zip Code

**School Information**

College/University: Click here to enter text.

Degree Sought: Click here to enter text. Expected Graduation Date: MM/YYYY

**MN TWS Student Professional Development Grant**

**Application Form**

**Event Information**

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Name of event:

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Sponsoring organization:

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Location (city, state):

Event dates: Click here to enter a date.

**Conference Information (if presenting)**

Presentation Type: Choose an item. Date: Click here to enter a date.Time: Click here to enter text.

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Session Title:

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Paper/Poster Title:

**Please explain in 250 words or less your involvement with TWS or if your group has participated in any community activities. Also please briefly describe how this event will benefit you or your student group.**

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**MN TWS Student Professional Development Grant**

**Application Form**

**Travel Expenses**

Provide an estimate of the total expenses expected for your trip and the amount requested from MN TWS.

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| --- | --- |
| Transportation | Enter amount |
| Lodging  | Enter amount |
| Registration  | Enter amount |
| Other (Explain) | Enter amount |
| **Total Expenses** | Enter amount |
| **Total Requested** | Enter amount |

Please use this space to further describe your budget as needed:

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Total funds available from other sources: $ Click here to enter text.

Is travel to this event dependent on funding from MN TWS? Choose an item.

Are you willing to accept a partial award of your requested amount? Choose an item.

**Verification**

The undersigned represent that the information supplied above and on attached documents is true, that the applicant meets the eligibility requirements as stated herein, and that the financial need as stated is accurate.

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 Click here to enter a date.

Student Signature Date