

Florida Aquatic Plant Management Society
AQUATIC PLANT MANAGER OF THE YEAR



Note: Nomination must be made using this form and within the space provided to allow for uniform evaluation.
Deadline: September 30th | **Award:** Plaque and \$500

| OFFICIAL NOMINATION FORM | | | | DATE |
|---|-----|------------|-----------------------|------|
| Nominee Last Name | | First Name | | |
| Employer | | | | |
| Address | | | City | |
| State | Zip | Phone | Email | |
| Years of Aquatic Plant Management Experience | | | Years Active in FAPMS | |
| Person Submitting Nomination | | | | |
| Contact Information | | | | |
| DESCRIBE THE NOMINEE'S EXPERIENCE AND ACCOMPLISHMENTS IN THE FOLLOWING CATEGORIES | | | | |
| Herbicide Control (years, techniques, etc.) | | | | |
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| Biological Control (years, agents used, etc.) | | | | |
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| Mechanical Control (years, equipment used, etc.) | | | | |
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| Ingenuity (methods, ideas, design introductions) | | | | |
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| Research (for self or others) | | | | |
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| Education (classes, seminars, degrees, etc.) | | | | |
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| Public Relations (with public, interagency, special interest groups) | | | | |
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| FAPMS Activities (committees, programs, etc.); Distinguished service | | | | |
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| Other (plant ID – exotic/native, target/non-target; environmental awareness – endangered species) | | | | |
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