



NEW JERSEY MOSQUITO CONTROL ASSOCIATION, INC.

Encouraging/Supporting Mosquito Control Since 1913

Website: www.njmca.org

NJMCA Daniel M. Jobbins Scholarship Application Form

Applicant's Name: _____
(First) (Middle) (Last)

University: _____

Department: _____

Address: _____

Phone Number: _____

E-mail: _____

Research Title: _____

Signature: _____ Date: _____
(Applicant)

Attach to this form:

1. A research statement of not more than four (4) pages.
2. A curriculum vitae or resume.
3. A letter of recommendation from the major advisor.
4. Submit six (6) copies to the address below.

(Additional information may be required at the discretion of the NJMCA Scholarship Committee.)

New Jersey Mosquito Control Association, Inc.
Scholarship Committee
c/o Heather Lomberk
Superintendent, Mosquito Control Division
800 E. Commerce Street
Bridgeton, NJ 08302
856-453-2170
856-459-9692 (fax)

Applications may also be submitted via email to heatherlo@co.cumberland.nj.us