



STEWARDSHIP PLAN PROVIDER MEMORANDUM OF UNDERSTANDING

Required under the Forestry Title of the 1990 Federal Farm Bill to become a certified plan writer under the Forest Stewardship Program.

This Memorandum of Understanding is entered into between the Michigan Department of Natural Resources, Forest Resources Division and the following Resource Professional:

Name	Supervisor
Employer	Telephone Number (Work)
Address	Telephone Number (Home)
City, State, ZIP	E-Mail
Area(s) of Expertise (Forestry, Wildlife, Botany, Fisheries, etc.)	

FOREST RESOURCES DIVISION AGREES TO:	RESOURCE PROFESSIONAL AGREES TO:
<ol style="list-style-type: none"> Maintain an official list of resource professionals who have entered into this agreement. Provide training opportunities, conduct regional training meetings and provide current information relevant to Forest Stewardship Plans to resource professionals who have entered this agreement. Provide well-defined standards for Forest Stewardship Plans. Promptly review Forest Stewardship plans submitted for approval. Clearly state deficiencies in any substandard Forest Stewardship Plan that cannot be approved as submitted, and get the plan back to the writer for correction. 	<ol style="list-style-type: none"> Maintain certification through training and other requirements as determined by the Forest Stewardship Coordinator. Respond promptly to requests for Forest Stewardship Plans, and prepare these plans for forest landowners as requested. Maintain professional standards of conduct that are just and honorable and advocate land management that is ecologically sound. Appropriate codes of conduct include the State of Michigan Forester Registration Administrative Rules (Article 21, Part 3), and Society of American Foresters Code of Ethics. Follow the Stewardship Plan in all subsequent management activities prescribed and/or supervised on certified Forest Stewardship acreage. If management activities are undertaken or changes from the plan are advisable, inform the landowner and Forest Stewardship Coordinator.

Both parties agree that this Memorandum of Understanding may be cancelled by either party by written notice to the Resource Professional (and employer, if applicable) or Department of Natural Resources, Forest Resources Division. Cancellation will become effective thirty (30) days after said notice is given.

Counties you will prepare plans in:

I, the undersigned, certify that I have read, understand, and agree to comply with the conditions of this Memorandum of Understanding.

_____	_____	_____
Resource Professional's Signature	Print or Type Name Here	Date
_____	_____	_____
Resource Professional Supervisor's Signature	Print or Type Name Here	Date
_____	_____	_____
Stewardship Coordinator, MDNR-FRD	Print or Type Name Here	Date

Return Completed Memorandum of Understanding to: MICHIGAN DEPARTMENT OF NATURAL RESOURCES
FOREST RESOURCES DIVISION
FOREST STEWARDSHIP COORDINATOR
PO BOX 30452
LANSING, MI 48909-7952