



Southern Association of Forensic Scientists

APPLICATION FOR MEMBERSHIP

Type or Print in Block Letters. See back of page for further instructions.

Name:	Business Phone															
Employing Agency:	Present Job Title:															
Laboratory Name:	Present Job Duties:															
Business Mailing Address:	<div style="border-top: 1px solid black; margin-top: 10px;"> Date of Employment: Full or Part Time? </div>															
<p>Field of Interest (Circle as many as you need to describe your interests): A = Analytical Chemistry (drug identification); B = Biology/Biochemistry (serology/DNA); C = Contract Traces (transfer traces); D = Document Examination; F = Firearm and Toolmark Examination; G = General (equivalent to choosing all areas); P = Pathology; T = Toxicology; X = Police Science (includes fingerprints, accident reconstruction, voice identification, crime scene search, deception detection, etc.</p>																
Total Experience in Forensic Science _____ years _____ months Self employed? _____ Are you presently analyzing evidence for court? _____ Have you testified in court as a qualified expert witness? _____																
Previous Employers, Job Titles and Date of Employment (Attach additional sheets as necessary)																
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Education:</th> <th style="width: 20%;">Dates</th> <th style="width: 20%;">Major</th> <th style="width: 15%;">Degree</th> <th style="width: 15%;">Date</th> </tr> <tr> <td>College or University</td> <td>Attended</td> <td></td> <td>Conferred</td> <td></td> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		Education:	Dates	Major	Degree	Date	College or University	Attended		Conferred						
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College or University	Attended		Conferred													
Professional Activities, Societies, Offices, Committees, Papers, etc.: (Attach additional sheets as necessary)																
Location(s) and Date(s) of SAFS Meetings Attended:	Name of Sponsor (SAFS voting member)															

My sponsor has endorsed my application on the back of this form. Should my application be acted upon favorably, I agree to adhere to and support the Bylaws of the Southern Association of Forensic Scientists.

(SIGNATURE)

(DATE)

INSTRUCTIONS

1. The completed application must be received no later than June 1 by the Treasurer in order to be voted on at the Fall business meeting.
2. The applicant must have attended at least one meeting prior to the fall meeting at which he/she will be voted on. This presumes registration fee is paid.
3. A voting member of the Association who knows the applicant well must serve as sponsor by writing a detailed letter extensively endorsing the applicant. See below
4. A non-returnable \$10.00 application fee must accompany this application.
5. Mail the completed application and letter of endorsement to: James W. Campbell, Jr.
G.B.I. Forensic Science Lab
925-A Mohawk Street
Savannah GA 31419

LETTER OF ENDORSEMENT

(additional sheets may be attached as needed)

Chairman
Membership Committee
Southern Association of Forensic Scientists

Dear Sir:

I, _____ do hereby sponsor the application of

_____ for membership in the Southern Association of Forensic Scientists for the following reasons:

I further state that I have personal knowledge of the applicant and the information contained in this letter of sponsorship.

Signature of Sponsor

SPONSOR PLEASE NOTE: You are reminded that, as sponsor of this applicant, it will be your responsibility to answer any questions which arise concerning the facts of the application and the eligibility of the person sponsored. Do not agree to sponsor a person who is not well known to you. Do take the time to make sure that you have personal knowledge that all statements on the application are true. You are expected to keep the applicant informed of the status of the application and to attend the business meeting at which the application will be considered.