Instructions For Completing The Membership Application For The Northwest Association of Forensic Scientists

Thank you for your interest in the Northwest Association of Forensic Scientists.

Attached with these instructions are:

- 1. Membership Application,
- 2. Endorsement Letters, and
- 3. NWAFS Constitution and Bylaws

Please read the Constitution and Bylaws, especially Chapter 1 of the Bylaws which detail the different classes of membership offered by the Association. Decide the class of membership you would like to apply for and note it on the application form.

Please fill out the application form as completely as you can. Please include business telephone and fax telephone numbers for our records. In addition, please supply the proper ZIP+4 code for the address you would like to have your correspondence sent. If you don't know your ZIP+4 code, check the address label from a magazine or a bill. If you have an electronic mail (E-Mail) address, please note it on the application.

If you are applying for Regular membership, please note you must submit letters of endorsement from 3 Regular members of the Association with your application. Please also note an endorsing statement is REQUIRED for Regular members

If you are not sure who in your area is a Regular member, contact the Membership Secretary (below) for further information. It is the applicant's responsibility to send the endorsement letters along with the Membership application to the Membership Secretary.

Please Note:

Endorsements for applications will not be accepted independently from the membership application! Any endorsement received without an application will be returned to the endorser!

You are encouraged to send your application package to the address below no later than August 1 to be considered for membership during the current calendar year.

For more information, please contact:

Kayla Brown - Membership Secretary Ada County Sheriff's Office 7200 Barrister Drive Boise, ID 83704

E-mail: NWAFSmembership@gmail.com

NWAFS MEMBERSHIP APPLICATION

Name:					
Title:					
Agency:					
Address:City:			State:	Zip:	
only.		`	Julio:	2.12	
Phone:	Fax:		Em	ail:	
Membership Type: Regular Length of Employment:	Assoc		-		
Description of Current Duties:					
EMPLOYMENT HISTORY: Employer	<u>Titl</u>	<u>e</u>			<u>Dates</u>
Have you testified as an "Expert What percentage of your time do presentation, or supervising those we EDUCATION AND TRAINING: Institution / Location	you spend in the	e examinatio			ourtroom <u>Year</u>
PUBLICATIONS or PRESENTATION	DNS:	Citatio	<u>n</u>		
MEMBERSHIPS IN OTHER PROFE	ESSIONAL ORG	SANIZATIOI	NS:		
NAMES OF ENDORSING MEMBER (attach completed and signed Letter					ood standing
I have read the NWAFS Constitution	and Bylaws:	Yes	 No		
Signature of Applicant:				Date:	

NWAFS MEMBERSHIP APPLICATION

Letter of Endorsement for Regular Member Applicant

Name of Applicant:
Applicant's Employer:
How long have you known the applicant:
Do you endorse the applicant to be, through their current employment, applying knowledge of the natural sciences in the examination of physical evidence related to legal problems? Yes No
Additional Endorsing Statements (REQUIRED):
Signature: Date:
Please print your name:

Return this form to the Applicant!!