



NJAFS

NEW JERSEY ASSOCIATION OF FORENSIC SCIENTISTS
SCHOLARSHIP AWARD APPLICATION

NOTICE TO APPLICANT

Listed below are the requirements for the New Jersey Association of Forensic Scientists Scholarship Award. Please review the requirements carefully before completing the application.

**IF YOU DO NOT MEET THESE REQUIREMENTS,
DO NOT COMPLETE THE APPLICATION.
THIS IS A \$1,000.00 ONE-TIME AWARD.**

1. You must be enrolled in a Science program (Biology, Chemistry, Natural, Forensic Science, etc.) as either a Junior or Senior undergraduate or at the graduate level (as of September 1, 2011 for the 2011 award) with the intent to pursue a career in Forensic Science.
2. You must meet one of the following criteria to be considered for the NJAFS Scholarship:
 - Be a current member of the NJAFS; **OR**
 - Attend a college or university in New Jersey; **OR**
 - Be a resident of New Jersey while attending a college or university outside the state.
3. You must be able to demonstrate excellence in your academic program.
4. You must not have received this award previously.

In order to apply for the award the following must be submitted.

1. An NJAFS Scholarship Award Application.
2. **TWO** NJAFS Scholarship Award Recommendation Forms indicating your worthiness and intent to pursue a career in forensic science. **One of which must be** from a professor involved in your science curriculum.
3. A copy of your current college transcript.

Return the required documents to:
**NJAFS Scholarship Award
PO Box 9304
Trenton, NJ 08650**

Questions? Call NJAFS Scholarship Committee
Chairman Ken Williams at (973)256-7790

APPLICATION DEADLINE IS OCTOBER 31, 2011

**THE NJAFS SCHOLARSHIP AWARD WILL BE PRESENTED AT THE
FOURTH QUARTERLY MEMBERSHIP MEETING.**

The NJAFS Scholarship Award is a program of the New Jersey Association of Forensic Scientists, Inc. in its capacity as a private, not-for-profit, professional association. The program has no connection whatsoever to any employer/agency of NJAFS members or any agency of government.



NJAFS

NEW JERSEY ASSOCIATION OF FORENSIC SCIENTISTS

SCHOLARSHIP AWARD APPLICATION

Date _____

Student's Name (Last, First, Middle) _____

Present Address

Street _____ Hall/Dorm/Apt. _____

City _____ State _____ Zip Code _____

Permanent Address

Street _____ Hall/Dorm/Apt. _____

City _____ State _____ Zip Code _____

At which address do you wish to receive mail related to this application? Present Permanent

Date of Birth _____ **Telephone Number** () _____

Current College/University (Name and Address)

Class Level (as of 9/1/2011) Undergraduate Jr. _____ Undergraduate Sr. _____ Graduate Student _____

Current Major _____ **Current GPA** (Include transcript) _____

Extra Curricular Activities

Community Service/ Activities

List your internships.

Why have you chosen to pursue a career in the field of forensic science?

What do you think you will bring to the field of forensic science?

Name of recommending professor

Address _____

Telephone Number () _____

Name of person submitting second recommendation

Address _____

Telephone Number () _____

Applicant's Signature



NEW JERSEY ASSOCIATION OF FORENSIC SCIENTISTS SCHOLARSHIP AWARD RECOMMENDATION FORM

RETURN THIS FORM (TO THE ADDRESS BELOW) BY OCTOBER 31ST

Date _____

NJAFS Scholarship Award, P.O. Box 9304, Trenton, NJ 08650

Student's Name (Last, First, Middle) _____

Name of person submitting this recommendation _____

Address _____

Telephone Number () _____

Employer _____ Occupation _____

The applicant is required to provide two recommendations, one of which must be from a college professor. Are you submitting this recommendation as a college professor?

YES _____ NO _____

How long have you known the applicant? _____

Please use the following codes to rate the applicant in the areas noted below.

O = Outstanding E = Excellent G = Good A = Average F = Fair

Knowledge of subject matter _____ Ability to work with others _____ Communication skills _____ Leadership _____ Reliability _____

Initiative _____ Maturity _____ Integrity _____ Attitude _____

Why should this applicant receive this award? (Attach additional sheets if necessary)

Please explain what you know of this applicant's desire to pursue a career in forensic science. (Attach additional sheets if necessary)

Signature _____



NEW JERSEY ASSOCIATION OF FORENSIC SCIENTISTS SCHOLARSHIP AWARD RECOMMENDATION FORM

RETURN THIS FORM (TO THE ADDRESS BELOW) BY OCTOBER 31ST

Date _____

NJAFS Scholarship Award, P.O. Box 9304, Trenton, NJ 08650

Student's Name (Last, First, Middle) _____

Name of person submitting this recommendation _____

Address _____

Telephone Number () _____

Employer _____ Occupation _____

The applicant is required to provide two recommendations, one of which must be from a college professor. Are you submitting this recommendation as a college professor?

YES _____ NO _____

How long have you known the applicant? _____

Please use the following codes to rate the applicant in the areas noted below.

O = Outstanding E = Excellent G = Good A = Average F = Fair

Knowledge of subject matter _____ Ability to work with others _____ Communication skills _____ Leadership _____ Reliability _____

Initiative _____ Maturity _____ Integrity _____ Attitude _____

Why should this applicant receive this award? (Attach additional sheets if necessary)

Please explain what you know of this applicant's desire to pursue a career in forensic science. (Attach additional sheets if necessary)

Signature _____