

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 \$1,500.00 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) 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 all college transcripts (please include undergraduate and graduate, if applicable)

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

Questions? Call NJAFS Scholarship Committee Chairman Tanvi Kothari at (609)584-5054 ext 5465

APPLICATION DEADLINE IS OCTOBER 31

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



Date	OF FORENSIC
Student's Name (Last, First, I	liddle)
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 re	ceive mail related to this application? Present Permanent
Date of Birth	
Current College/University	(Name and Address)
Class Level (as of Septem	oer 1) Undergraduate Jr Undergraduate Sr Graduate Student
Current Major	Current GPA (Include transcript)
Extra Curricular Activities	
Community Service/ Activ	ties

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

PORE	RETURN THIS FORM (TO THE ADDRESS BELOW) BY OCTOBER 31 ST		
Date	NJAFS Scholarship Award, P.O. Box 9304, Trenton, NJ 08650		
Student's Name (Last, First, Middle)			
Name of person submitting this recommen	dation		
Address			
Telephone Number ()			
Employer	Occupation		
The applicant is required to provide two recommendation as a college professor?	commendations, one of which must be from a college professor. Are you submitting this		
YES	NO		
How long have you known the applicant? _			
Please use the following codes to rate the	applicant in the areas noted below.		
O = Oustanding E = Excellent G = Go	ood A = Average F = Fair		
Knowledge of subject matter Ability to work with others Communication skills Leadership Reliability			
Initiative Maturity Integri	ity Attitude		
Why should this applicant receive this award? (Attach additional sheets if necessary)			
Please explain what you know of this appli	cant's desire to pursue a career in forensic science. (Attach additional sheets if necessary)		
Signatura			
Signature			



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