



SOCIETY FOR WILDLIFE FORENSIC SCIENCE

STUDENT OUTREACH PROGRAM

Supervisor Application

Name (Full legal name)

Street Address

City

State/Territory

Postal Code

Country

E-mail

Phone Number

Organization

Position

Area of Expertise

Research Ideas/Needs

Do you have access to instrumentation and/or equipment necessary for the research

Yes

No

If yes, what is the instrumentation/equipment:

Do you have prior publications

Yes

No

If yes, please list recent publications

Is there funding for this research

Yes

No

Do you have a student who has applied for a project with you, if so what is their name

Are you a current member of the Society for Wildlife Forensic Sciences

Yes

No

Signature

Date

Please Note: Upon completion of the application please forward your CV to SWFSStudentOutreach@gmail.com with the documents titled with your name (i.e., NameCV). Once the complete application is processed you will be notified and placed in the database to be matched with a student and/or project (if you do not have one already). If the submit form button does not work, please send the form through email.

Thank you

SWFS Student Outreach Program Coordinator