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	A DE	M	
Position		Area of Expertise	
Research Ideas/Needs	YOU WAR		
Do you have access to instrum	nentation and/or equipm	ent necessary for th	ne research
Yes			

If yes, what is the instrumentation/equipment:

No

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

Please Note: Upon completion of the application please email this form to tasha.bauman@wyo.gov and forward your CV 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).

Thank you SWFS Student Outreach Program Coordinator