



California Association of Criminalists

Edward F. Rhodes Memorial Award

SPONSORSHIP FORM

Please complete this form by providing the requested information. Additional pages may be used to complete a response. The Sponsor Form must be received by the Awards Committee by **December 31st**.

1. Sponsorship Information

Name: _____

Address: _____

Phone #: _____

CAC Membership Status: Affiliate Provisional Corresponding Full

2. Applicant Information

Name: _____

Is the applicant employed in the forensic sciences? Yes No

If yes, where and how long employed? _____

If no, describe the applicant's activities in preparing for a career in forensic science.

Please describe how the applicant has shown initiative or potential in professional development.

Signature _____ Date _____

Send completed application to:

CAC Awards Committee Chairperson

Contact information can be found at:

<http://committees.cacnews.org>
