



American Society of Trace Evidence Examiners Scholarship Applicant Form

Name: _____

School Residence Address:

Home Address: _____

School Phone Number: _____ Home Phone Number: _____

Alternate Phone Number: _____ Current Year: _____

E-mail Address: _____

College attended: _____

Degree program: _____

Please indicate which address and phone number is the best one for contacting you.

Application Requirements:

Scholarship Applicant Form

Scholarship Recommendation Form

Official School Transcript, including grades for the most recent completed semester

Essay detailing personal goals with regards to Trace Evidence, achievements, and reasons for award consideration (limit of 1000 words)

Interested candidates should submit all required materials by February 15, 2019 to:

ASTEE Awards Committee
ATTN: Darrel Hall
13309 SE 84th Ave, Suite 200
Clackamas, OR 97015
darrel.hall@state.or.us
(971) 673-8246