APPLICATION FORM

CALVIN H. GODDARD AWARD FOR EXCELLENCE

NOMINATING OFFICIAL

Name: _____ **Telephone:_____**
Title: _____ **E mail:_____**
Law Enforcement Agency – Name & Address:
_____

CANDIDATE(S) BEING NOMINATED

Name: _____ **Telephone: _____**
Title: _____ **E mail: _____**
Law Enforcement Agency – Name & Address:
_____

Briefly describe the candidate's/group's trai ning and experience/history w ithin the science of firearms identification: (for indi vidual candidate, pleas e attach a current CV/Summary of Court Qualifications if available)

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Is the can didate/group a memb er of the Association of Firearm and Toolmark Examiners? Yes □ No □

Is the can didate/group currently w orking in a law enforcement related firearm identification unit? Yes □ No □

Describe the specific reason fo r the candidate/ grou p being nominated fo r the award. Please share the details of the excep tional, unique or interes ting situation or experience where implementation of best pr actices or unique method(s) in firear ms identification demonstrate excellence in an effort to help reduce gun related violent crime.

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(Attach additional sheets if necessary)

Additionally, please provide pertinent details that may contribute to the nomination.
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Please complete the following questions and return them to **Andre Demers** by mail, fax, or email by **March 27, 2009**:

Forensic Technology **Tel: 514.489.4247**
C/O André Demers **Fax: 514.485.9336**
5757 Cavendish Blvd., Suite# 200 **Email:andre.demers@contactft.com**
Cote St. Luc, PQ H4W 2W8