AMERICAN BOARD OF CRIMINALISTICS
APPLICANT REFERENCE

You have been given as a reference by the person listed below, who has applied for Certification in Criminalistics. Your cooperation in completing this form is sincerely appreciated. The information that you furnish will be held in the strictest confidence and will only be used to complete the evaluation of this applicant.

To be completed by applicant:

Applicant Name: _____

Area(s) in which you are seeking certification:

☐Biological Evidence Screening
☐Comprehensive Criminalistics
☐Drug Analysis
☐Forensic DNA
☐Fire Debris Analysis
☐Foundational Knowledge
☐Hair and Fiber
☐Paint and Polymer

1. Length of time you have known applicant in years? _____
2. Relationship to applicant? _____
3. Has this applicant ever been censured for unethical conduct or procedure? ☐Yes ☐No
   (If yes, please provide a written explanation on a separate page)
4. Would you recommend this applicant for a position of trust and confidence? ☐Yes ☐No
   (If no, please provide a written explanation on a separate page)
5. Please describe your knowledge of the applicant to include: the type of forensic work applicant performs; percentage of time devoted to forensic work; training in forensic science; and special qualifications of the applicant.
6. Do you feel this applicant possesses the skills and qualifications needed to be certified in area of certification he/she is seeking? ☐Yes ☐No

   Please comment on specific skills and qualifications which the applicant possesses, including the length of time the applicant has engaged in casework in the specified discipline(s).

Please feel free to provide additional comments on the back of this form or on another sheet of paper. The applicant is required to return this reference with their application. Thank you for your cooperation in this request.

_____ _____
Signature Date Telephone

_____ _____
Name (Print) Business Address

_____ _____
Title/Position City, State, Zip Code