

<https://w3dev8.nist.gov/form/osac-application-form>



**No emails will be sent.**

# OSAC Application Form

Required\* Indicates required field

Thank you for your interest in the OSAC!

Please complete and submit the application form below to be eligible and considered for future OSAC membership and affiliate positions and as a Scientific and Technical Review Panel (STRP) member. Applications will be used by the OSAC Program Office, Forensic Science Standards Board (FSSB), Scientific Area Committees (SACs), Subcommittees, Task Groups, and Interdisciplinary Committees to make future selections. Applications will be kept on file for three years and the application pool will be purged on a rolling basis each year on October 1.

OMB Control Number: 0693-0070

Expiration Date: 04/30/2021

## Membership Application

First Name Required\*

Last Name Required\*

Email Required\*

Title (optional)

Affiliation (i.e., employer) Required\*

### Education

Check all that apply.

- BS/BA
- MS/MA
- J.D.

- Ph.D.
- M.D.
- D.D.S/D.M.D.
- Other

Current Employer Category

Check one.

- Academia
- Federally Funded Research and Development Center
- Federal Government
- Local Government
- Private Sector (includes self-employed)
- State Government

Current Job Category

Provide the percentage of each selected [ex.: 70% researcher + 30% educator].

- Lawyer ?
- Educator/Trainer ?
- Judge ?
- Lab Manager/Director ?
- Practitioner ?
- Quality ?
- R&D Technology Partner Personnel/Management ?
- Researcher ?
- Other ?

Summary of Expertise

Enter a brief summary of your background, expertise, work/research, and years of experience.

Summary of Expertise Required\*

1500 character(s) remaining

CV/Resume

CV/Resume must be submitted for your application to be considered.

Upload a current CV/resume

(<https://nist.app.box.com/f/90f983cc962b4097b24e2cd8143addf2>)

Type the name of the file you uploaded to Box.com. Required\*

Please name the file with your Last Name\_First Name.

Area(s) of Expertise

Check all the apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Bloodstain Pattern Analysis ?                | <input type="checkbox"/> Friction Ridge ?                                   |
| <input type="checkbox"/> Crime Scene Investigation & Reconstruction ? | <input type="checkbox"/> Human Forensic Biology ?                           |
| <input type="checkbox"/> Digital Evidence ?                           | <input type="checkbox"/> Human Factors ?                                    |
| <input type="checkbox"/> Disaster Victim Identification ?             | <input type="checkbox"/> Ignitable Liquids, Explosives, & Gunshot Residue ? |
| <input type="checkbox"/> Dogs & Sensors ?                             | <input type="checkbox"/> Legal ?  |
| <input type="checkbox"/> Firearms & Toolmarks ?                       | <input type="checkbox"/> Medicolegal Death Investigation ?                  |
| <input type="checkbox"/> Facial Identification ?                      | <input type="checkbox"/> Quality Management ?                               |
| <input type="checkbox"/> Fire & Explosion Investigation ?             | <input type="checkbox"/> Seized Drugs ?                                     |
| <input type="checkbox"/> Footwear & Tire ?                            | <input type="checkbox"/> Speaker Recognition ?                              |
| <input type="checkbox"/> Forensic Anthropology ?                      | <input type="checkbox"/> Statistics ?                                       |
| <input type="checkbox"/> Forensic Document Examination ?              | <input type="checkbox"/> Trace Materials ?                                  |
| <input type="checkbox"/> Forensic Nursing ?                           | <input type="checkbox"/> Video/Imaging Technology & Analysis ?              |
| <input type="checkbox"/> Forensic Odontology ?                        | <input type="checkbox"/> Wildlife Forensic Biology ?                        |
| <input type="checkbox"/> Forensic Toxicology ?                        |   |

What level of the OSAC interests you as a volunteer?

Check all that apply.

- Interdisciplinary Committee ?
- Scientific and Technical Review Panel ?
- Subcommittee ?

Have you had any previous experience drafting voluntary consensus standards?

- No
- Yes

Have you had any previous experience implementing voluntary consensus standards?

- No
- Yes

I have read the [OSAC Code of Responsibility \(http://www.nist.gov/topics/organization-scientific-area-committees-forensic-science/osac-code-responsibility\)](http://www.nist.gov/topics/organization-scientific-area-committees-forensic-science/osac-code-responsibility) document, and if selected, understand and will adhere to the commitments required of me.

- Agree Required\*

## Privacy Act Statement

### Authority

The collection of this information is authorized under the NIST Organic Act, Title 15 U.S.C. § 272 (b)(10) and (b)(11) and the Paperwork Reduction Act (PRA), 44 U.S.C. § 3501 et seq.

### Purpose

Information is collected for the National Institute of Standards and Tech (NIST), Organization of Scientific Area Committees (OSAC).

## **Routine Uses**

NIST will use this information to conduct necessary government business and streamline correspondence with members of the OSAC. Disclosure of this information is permitted under the Privacy Act of 1974 (5 U.S.C. Section 522a) to be shared among NIST staff for work-related purposes. Disclosure of this information is also subject to all the published routine uses as identified in the Privacy Act System of Records Notices: COMMERCE/DEPT-23: Information Collected Electronically in Connection with Department of Commerce Activities, Events, and Programs.

## **Disclosure**

Furnishing this information is voluntary. When supplying the information, you are indicating your voluntary consent for NIST to use the information you submit for the purpose stated.

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0693-0070. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to:

National Institute of Standards and Technology  
100 Bureau Drive  
Gaithersburg, MD 20899  
ATTN: Timothy Brennan, Program Manager  
Organization of Scientific Area Committees  
Special Programs Office  
Timothy.brennan@nist.gov