



SOUTHEAST TEXAS APPLIED FORENSIC SCIENCE FACILITY  
 SAM HOUSTON STATE UNIVERSITY



**2009-2010 STAFS Facility Volunteer/Internship Registration Form**

Contact Info: Dr. Joan Bytheway, bytheway@shsu.edu; <http://www.cjcenter.org/stafs>

STAFS Facility Phone: 936-294-2310 Fax: 936-294-2311

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Emergency Contact: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Sex: Male or Female

US Citizen? Yes / No

Ethnic Background: (optional) \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

County of Residence: \_\_\_\_\_

School ID Number: \_\_\_\_\_ Major/Minor \_\_\_\_\_

Status: Freshman Sophomore Junior Senior Graduate Student Other \_\_\_\_\_

What is your area of interest? \_\_\_\_\_

Skills: \_\_\_\_\_

Have you taken any anthropology courses? If yes, which classes? If no, any related courses?

\_\_\_\_\_



SOUTHEAST TEXAS APPLIED FORENSIC SCIENCE FACILITY  
SAM HOUSTON STATE UNIVERSITY



## Information Required for Registration as a Volunteer for STAFS

Have you had/started a Hepatitis B Vaccination? Yes No

*(You will need to have at least started the series and completed the liability waiver to volunteer.)*

Have you had a Tetanus shot (Td) within the last 6 years? Yes No

*(You will need to have had an up to date tetanus to volunteer.)*

Do you have health insurance? If yes, who is your insurance provider?

*(You will need to provide proof.)*

Have you volunteered before at STAFS or in the College of Criminal Justice? Yes No

If yes, in what capacity? \_\_\_\_\_

### **Activities a volunteer/intern might engage in while working at STAFS:**

Primary responsibilities will be research and the processing of skeletal remains for the Southeast Texas Applied Forensic Science Facility including collection of data (including field, laboratory, et cetera), the cleaning and labeling of human remains as well as other collection maintenance.

Other tasks are, but not limited to, donation program help, data entry or other tasks assigned by the supervisor.

Name of program director: Dr. Joan Bytheway

Director's phone number: 936.294.2310

Name of volunteer/intern program: Southeast Texas Applied Forensic Science (STAFS) Facility

### **Purpose of Program:**

Provide students with experience in physical and forensic anthropology as it pertains to the STAFS Facility

Volunteer approved for use of university vehicle? Yes No



SOUTHEAST TEXAS APPLIED FORENSIC SCIENCE FACILITY  
 SAM HOUSTON STATE UNIVERSITY



**Availability:**

Please place an X next to the times you are available to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9:00 AM							
9:30 AM							
10:00 AM							
10:30 AM							
11:00 AM							
11:30 AM							
12:00 PM							
12:30 PM							
1:00 PM							
1:30 PM							
2:00 PM							
2:30 PM							
3:00 PM							
3:30 PM							
4:00 PM							

Print Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing you are certifying that the information you provided is accurate to the best of your knowledge.*



SOUTHEAST TEXAS APPLIED FORENSIC SCIENCE FACILITY  
SAM HOUSTON STATE UNIVERSITY



## **Frequently Asked Questions** (Please keep for your own information)

### **1. Do you need to be a SHSU student?**

Yes, you must be a SHSU student in order to volunteer with us. You may be a transfer student or one that has already graduated in order to volunteer. Other qualified students/researchers will be considered on a case-by-case basis.

### **2. Do you need to be an anthropology major to volunteer?**

You should be in the process of or have completed the minor in forensic anthropology offered through the College of Criminal Justice at Sam Houston State University. If not working toward the minor, you must have passed Human Osteology (CJ 477) or Foundations of Forensic Anthropology II. Related fields (Criminal Justice, Forensic Science, Biology, or Forensic Chemistry) will also be considered.

### **3. What types of jobs or tasks are available at STAFS?**

This program focuses on people interested in physical and forensic anthropology. Tasks range from processing skeletal remains, body donation placements and skeletal pick-ups, bone labeling, collection upkeep, to maintaining databases, filing, and data entry. Experience level and osteology skills are the major factor in determining your role with us.

### **4. Are there other volunteering opportunities for non-physical anthropology students?**

Yes. Criminal Justice, Forensic Science, Biology, Photography, and Forensic Chemistry undergraduate and graduate students are eligible to apply. Applications are reviewed by the Director, however, opportunities are not guaranteed.

### **5. Where can I get the necessary vaccinations?**

Sam Houston students may contact the Student Health Center at Sam Houston State University. Immunizations are provided at a discounted rate. The current price for students for the Hepatitis B series (3 shots) is \$33 per shot, and the tetanus immunization is \$29. Prices and availability are subject to change, so please call 936.294.1805 to confirm availability and make an appointment.

(<http://www.shsu.edu/~uhc/www/immunizations.html>) The Texas Department of Health gives the immunizations for \$10. Call 1.888.456.7115 to make an appointment. Local doctors' offices and some pharmacies may also give the shots.



SOUTHEAST TEXAS APPLIED FORENSIC SCIENCE FACILITY

SAM HOUSTON STATE UNIVERSITY



**6. Can I start processing before I get shots?**

Yes, but this is not recommended or preferred. You should at least start your Hep B series.

**7. It has been a long time since I had my Hepatitis vaccination, do I need to get one again?**

It may not be necessary. There is a titer you can get to see if you have the antibodies. Consult a doctor.

**8. What type of vaccination documentation is necessary?**

We do not require documentation of vaccinations, but we require you to sign the application form honestly. We ask that you do not provide us with your full medical records.

**9. Do I need health insurance?**

Yes, whether personally issued health care or health care issued through SHSU. Do understand that as a volunteer STAFS does not cover doctor appointments or emergency hospital visits if an accident would occur. As a SHSU student, you have full access to the Student Health Center.

**10. What is the Blood Borne and Airborne Pathogens Training?**

There are two DVDs that must be watched on exposure risks associated with human materials and the general safety precautions that should be taken. A quiz will follow each DVD, and a passing grade is required. STAFS Facility workers and volunteers abide by OSHA standards. These standards will be discussed in the videos, and additional information will be provided by the Director.

**11. What types of risks do I have?**

STAFS does accept donations from those with communicable or infectious diseases, but most volunteers will be handling material that is of low risk for any biological agents. The most common risks include mishandling of sharp implements, pulled muscles, and tripping hazards.

**12. What is the purpose of the liability waiver?**

The liability waiver serves to inform the volunteer/intern of the risks involved in volunteering for this type of research and to relinquish STAFS of any liability.

**13. What is the purpose of the confidentiality statement that students must sign?**

The research conducted at the STAFS Facility is highly sensitive and requires strict confidentiality to maintain the integrity of not only STAFS but the donors and their families as well.



SOUTHEAST TEXAS APPLIED FORENSIC SCIENCE FACILITY  
 SAM HOUSTON STATE UNIVERSITY



## 2009-2010 STAFS Facility Volunteer/Internship Registration Form

Checklist:

**Name of Volunteer/Intern:** \_\_\_\_\_

Please initial each item and sign below that the volunteer has have completed all requirements

**Initials      Date**

\_\_\_\_\_ \_\_\_\_\_ Completed and signed Volunteer/Intern Registration Form

\_\_\_\_\_ \_\_\_\_\_ Completed and signed Liability Waiver

\_\_\_\_\_ \_\_\_\_\_ Completed and signed Confidentiality Statement

\_\_\_\_\_ \_\_\_\_\_ Provided documentation of Health Insurance

\_\_\_\_\_ \_\_\_\_\_ Completed Hepatitis B Vaccination form

\_\_\_\_\_ \_\_\_\_\_ Completed and passed the blood borne/airborne pathogens training DVDs  
 and quizzes

\_\_\_\_\_ \_\_\_\_\_ Received a copy of the Processing Instructions

**Director's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Volunteer/Intern Start Date:** \_\_\_\_\_

**Volunteer/Intern End Date:** \_\_\_\_\_