



Membership Application TNAI

Please print and return to:

TN – IAI
Elizabeth Reid, Treasurer
P.O. Box 160002
Nashville, TN 37216-0002

APPLICATION FOR MEMBERSHIP

All applications must be accompanied by a \$25.00 membership fee (\$10.00 Student). Please send check or money orders (no cash), which will be refunded if the application is rejected. Incomplete applications will be returned. Applications fees paid to the division between January 1 and September 30 will be applied to the current year. Applications fees paid to the division between October 1 and December 31 will be applied to the following calendar year.

MEMBERSHIP QUALIFICATIONS

ACTIVE MEMBERS are salaried employees of federal, state, county, municipal governments, or some division thereof, and who are actively engaged in the practice of the science of identification. This includes persons engaged in criminal investigations at any level.

ASSOCIATE MEMBERSHIP in the association will be available to all reputable persons wholly or partially engaged in any of the various phases of the science of identification, and who are not qualified for active membership. ASSOCIATE MEMBERS, shall, in all respects be subject to the same rules, fees and charges entitled to the same rights and privileges as Active Members, except that they shall not be entitled to hold office.

STUDENT MEMBERSHIP is available for any student of an accredited college or university, full or part time, who is taking courses in order to pursue a career in various phases of the science of identification or the law enforcement field.

Name _____ Title _____

E-MAIL ADDRESS _____

SEX: _____ RACE: _____ PLACE OF BIRTH: _____ BIRTH DATE: _____

EMPLOYED BY: _____ HOW LONG? _____

EMPLOYER'S ADDRESS: _____

EMPLOYER'S PHONE #: _____

NAME OF IMMEDIATE SUPERVISOR: _____

ARE YOU MEMBER OF THE IAI? _____

ARE YOU CERTIFIED BY THE IAI? _____ IF YES, WHAT CERTIFICATION _____

LIST OF WORK HISTORY IN CHRONOLOGICAL ORDER (include college history, degrees and honors on a separate sheet.

STUDENT: School Attending: _____ Major: _____

NAME OF RECOMMENDER: (optional) _____ TNAI Member

PHONE OF RECOMMENDER: _____

Have you ever been convicted of a crime? Y/N (if yes provide details on the charges, arresting agency, sentence, dates, etc.)

I hereby make application for: **Active Associate or Student Membership** in the TNAI in accordance with its bylaws and constitution. I further agree to abide by the Code of Ethics formulated by the TNAI. I certify that all information I have furnished on this application is true and accurate to the best of my knowledge. Any omission or falsification of information will be a basis for rejection or denial of continued membership.

SIGNATURE OF APPLICANT _____ Date _____