



IAAI-ECT

Renewal Application International Association of Arson Investigators Evidence Collection Technician

IAAI Member No.: _____ Date: _____
Membership in the IAAI is not required. This information is requested to assist the staff in processing the application.

Last Name: _____ First Name: _____ M.I.: _____

Company: _____

Address: _____ Home Work Apt. No.: _____

City: _____ State: _____ Country: _____ Zip: _____

Phone/Cell: _____ Email: _____

Payment:

Members: \$75.00 (USD)

Non-Members: \$295.00 (USD)

Submit application, supporting documentation and credit card payment to IAAI-ECT@firearson.com as **one complete PDF** document.

An invoice will be created for applications received without credit card payment. The invoice can be paid online in your profile, by calling the IAAI office or by mailing a check payable to IAAI.

Send to:
IAAI
2331 Rock Spring Road
Forest Hill, MD 21050

Application will be processed once payment is received.

Please contact our office if you have any questions. IAAI-ECT@firearson.com or 410-451-3473

By submitting this application to the IAAI, **with all required documentation**, either via email or electronic communications, the applicant certifies this information to be true and correct to the best of their knowledge and certifies that they have read and understand the program requirements. The intentional submission of false information as part of this application will be cause for immediate rejection of the application and potentially subject the applicant to other penalties, including removal of IAAI member benefits.

Applicant's signature: _____ **Date:** _____

WORK EXPERIENCE: You must document a minimum of an additional 18 months of general experience in a fire investigation related industry acquired during the preceding 3 years. Please provide documentation to support your experience such as a letter from your employer or employment records.

Current Employer:		Office Use Only
Position		
Address:		
Phone:	Supervisor:	
Years of Experience	Dates: From: To:	
Letter from employer must be attached		
Previous Employer:		Office Use Only
Position		
Address:		
Phone:	Supervisor:	
Years of Experience	Dates: From: To:	
Letter from employer must be attached		

TRAINING & EDUCATION: Please provide information regarding the training courses that you are submitting in support of your renewal application for the Evidence Collection Technician. **Course transcripts or certificates of training will be accepted as documentation for the training requirement so long as the transcript or certificate clearly indicates the training was tested.** All documentation will be subject to approval. Additional pages may be attached if necessary.

NOTE: Training must have been completed within the past 3 years.

Course Title	Date	Tested Hours	Office Use Only
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
Total Tested Training Hours (Minimum of 24):			

Certification of your employment (including length of time) and certification that you participated in the collection of the listed evidence should be included in the certification letter submitted by your employer. All events submitted as part of this application must have been conducted in the past three (3) years.

Active participation in "Evidence Collection" includes the collection of at least 21 items of forensic evidence in a supervisory capacity or as part of a team or multi-party examination so long as the applicant was engaged in the identification, collection, and documentation procedure. For the purposes of this program, forensic evidence is evidence that can undergo some form of scientific testing or evaluation and specifically excludes documentary evidence such as photographs.

SPECIFIC WORK EXPERIENCE:

Please provide information regarding a minimum of 21 items of forensic evidence collected that you are submitting in support of your application for the Evidence Collection Technician Program. Certification of this information should be included in the certification letter submitted by your employer. **All events submitted as part of this application must have been conducted in the past three (3) years (with a minimum of 5 items collected in each year since the previous certification or recertification).**

Location	Date	Evidence Collected

IAAI-ECT Renewal Application

International Association of Arson Investigators, Inc.
Evidence Collection Technician

Applicant's Last Name _____

Payment:

Members: \$75.00 (USD)

Non-Members: \$295.00 (USD) *Join the IAAI Today!!!* www.firearson.com

Payment method: VISA MC AMEX Check No.: _____ PO No.: _____

Card Number: _____ Security Code: _____

Name on Card: _____ Expiration Date: _____

Billing Address (if different from above): _____

Signature: _____

Email Receipt to: _____