



**Illinois Division**  
**International Association for Identification**  
**Membership Application**

|                         |
|-------------------------|
| Membership Number _____ |
| Date Approved _____     |
| Database Entry _____    |
| Materials Sent _____    |

\_\_\_\_\_  
Last Name First Name

\_\_\_\_\_  
Agency Title

\_\_\_\_\_  
Exact Mailing Address (Use this line for agency name if business address) Contact Phone Number

\_\_\_\_\_  
Street Address/P.O. Box/Room Number Alternate Phone Number (will NOT be published or released to anyone)

\_\_\_\_\_  
City/State/Zip Fax Number

\_\_\_\_\_  
E-mail Address Type of Membership Applying for :Active or Associate (See Below)

Are you a Parent Body IAI Member? \_\_\_\_\_ Have you ever been convicted of a crime? \_\_\_\_\_

Please state your qualifications for membership:

Please State any additional honors or degrees:

Recommended by:

\_\_\_\_\_  
Printed Name of Member in Good Standing Original Signature of Recommender ( No Copies Accepted) Member Number

I hereby make application for membership in the Illinois Division of the International Association for Identification, in accordance with its constitution and by-laws, and agree to be bound therewith. I certify that all the information on this application is true and correct. If any information is found to be false my membership may be revoked without notice.

\_\_\_\_\_  
Original Signature of the Applicant (No Copies Accepted) Date of Application

*Additional information may be required from the applicant prior to acceptance.*

**Membership Qualifications**

**Active Membership:** The active membership of this Division are persons actively engaged as an examiner, analyst, investigator, practitioner or supervisor in law enforcement or the forensic sciences, whose membership application has been approved and whose annual membership dues have been paid. Active members shall not lose their status because of retirement or change of position, so long as they remain members of the Division. Active Members may hold office. Active Mem-bers shall be entitled to one (1) vote with respect to each matter presented to the Division membership for a vote.

**Associate Membership:** All reputable persons, engaged full or part time, in any of the various phases of the science of identification and who are not qualified for active membership, are eligible to become associate members. Associate members are subject to the same rules, fees and charges as active members. They are entitled to the same rights and privileges as active members except they are not entitled to vote or hold office.

**Make Checks Payable to:** Illinois Division IAI  
**Where to Send:** Angela Mathews Secretary/Treasurer  
200 S. Wyman, Suite 400 \* Rockford, IL 61101  
**Office Number:** 815-987-7419 ext. 207  
**Email Address:** Angela\_Mathews@isp.state.il.us