The International Association for Identification

Utah Division of I.A.I.

Chartered 1989

Please send your application and payment to:

Utah I.A.I
PO BOX 65717
Salt Lake City, UT 84165-0717

Application for Membership

I make application for membership in the Utah Division of I.A.I in accordance with its Constitution and By Laws and agree to be bound therewith.

I am submitting the following with this application:

1. **Membership Dues (Please Check ONE)**

   ☐ **$25 - Annually CHECK**   ☐ **$30 - Annually CREDIT CARD**   ☐ **$350 – Lifetime**

2. **Permission to allow background check**   3. **Photograph of self**

Name: _____ **Title:** _____

Department / Agency: _____

Office Address: _____

Residence Address: _____

Send Business Mail to: Office or Residence

Telephone: Office: _____ **Cell:** _____

Email Address: _____

Have you ever been convicted of a crime? Yes or No   If yes state details on separate sheets.
   What Charge(s): _____

Forensic Disciplines: *(indicate your primary discipline as Number 1, then other areas as 2, 3, etc.)*

_____ **Crime Lab Specialist**   _____ **Forensic Studies Student**   _____ **Questioned Document Examiner**
_____ **Crime Scene Specialist**   _____ **Latent Print Examiner**   _____ **Voice Identification**
_____ **Forensic Photographer**   _____ **Forensic Artist**   _____ **Firearms/Toolmark Examiner**
_____ **Bloodstain Pattern Analyst**   _____ **Other** _____

MEMBERSHIP APPLYING FOR:

☐ **Active Member:** Consists of persons actively engaged in the science of forensic identification and their Bureau or Department Heads.

☐ **Associate Member:** Consists of all reputable persons, fully or partially engaged in any of the various phases of the science of Forensic Identification and Investigation, and who are not qualified for Active Membership, are hereby elifible to become Associate Members.

☐ **Student Member:** Consists of all persons who are full-time college students at an accredited college with a major in a law enforcement and/or forensic science related field. To be considered a full-time student, the individual must not be a member of this Division, and must not be employed by a law enforcement agency.

Degrees and/or Honors: _____
Recommended By: _____ **Member #:** _____
Signature of Applicant: _____ **Date:** _____

Approved By: _____ **Title:** _____ **Membership #** _____ **Date Received** _____ **Amount Received** _____