



Illinois Division  
International Association for Identification  
Membership Application

Member Number	_____
Date Approved	_____
Database Entry	_____
Materials Sent	_____

_____	_____	_____
Last Name	First Name	Middle Initial

_____	_____
Agency	Title

_____	_____
Exact Mailing Address (Use this line for business name)	Contact Phone Number

_____	_____
Street Address/P.O. Box/Room Number	Alternate Phone Number (will <u>NOT</u> be published or released)

_____	_____
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? Yes or No

Have you ever been convicted of a crime? Yes or No  
If yes, please attach a separate sheet explain circumstances

Please state your qualification for the membership:

Please state any additional honors or degrees:

Recommended by:

_____	_____	_____
Print Name of Member in Good Standing	Original Signature of Recommender (No Copies Accepted)	Member #

_____	_____
Original Signature of the Applicant (No Copies Accepted)	Date

Addition Information May Be Require from the Applicant Prior to Acceptance  
Membership Qualification

**ACTIVE MEMBERSHIP:** The Active Membership of the Association shall consist of heads of Bureau of Identification or Investigation (including persons under their supervision who are engaged in the science of identification), heads of Police Departments, Chiefs of Detectives and Sheriffs; PROVIDED, HOWEVER, that the foregoing persons are benefit employees of, and who receive salaries from National, State, County or Municipal governments, or subdivisions thereof. Incomplete applications may be rejected.

**ASSOCIATE MEMBERSHIP:** All reputable persons wholly or partially engaged in any of the various phase of the science of identification and who are qualified for Active Membership, are hereby eligible to become Associate Members; they shall in respects, be subject to the same rules, fee, and charges and entitled to the same rights and privileges as the Active Members, except that they shall not be entitled to vote or hold office. Incomplete applications may be rejected.

Send your check for **\$25.00** payable to the Illinois Division IAI, completed application and attachments to:

Illinois Division IAI  
c/o Detective Chereese Spears  
3355 Wooley Road  
Oswego, IL 60543  
Phone: 630-551-7359 email: [cspears@oswegoil.org](mailto:cspears@oswegoil.org)