



## **Student Membership Application TN-IAI**

*Please print and return to:*

**TN – IAI**  
**Elizabeth Reid, Treasurer**  
**P.O. Box 160919**  
**Nashville, TN 37216-0002**

### **APPLICATION FOR NEW MEMBERSHIP**

All applications must be accompanied by a \$10.00 Student membership fee via check, PayPal, or money order (no cash). Application fees paid to the division between Jan 1 and Sept 30 will be applied to the current year. Application fees paid to the division between Oct 1 and Dec 31 will be applied to the following calendar year.

### **MEMBERSHIP QUALIFICATIONS**

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

NAME: \_\_\_\_\_ IAI Parent Body Member: Yes ☐ No ☐  
SEX: \_\_\_\_\_ EMAIL: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_  
HOME MAILING ADDRESS: \_\_\_\_\_  
SCHOOL ATTENDING: \_\_\_\_\_ MAJOR: \_\_\_\_\_  
EXPECTED GRADUATION DATE: \_\_\_\_\_  
NAME OF ADVISOR \_\_\_\_\_  
PHONE OF ADVISOR: \_\_\_\_\_  
  
EMPLOYED BY: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

Have you ever been convicted of a crime: Yes ☐ No ☐  
(If yes, provide details on the charges, arresting agency, sentence, dates, etc. on a separate sheet)

I hereby make application **Student Membership** in the TNIAI in accordance with its bylaws and constitution. I further agree to abide by the Code of Ethics formulated by the TNIAI. 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.



Check box to agree to above terms if submitting application electronically

SIGNATURE OF APPLICANT \_\_\_\_\_ Date \_\_\_\_\_