International Association of Arson Investigators
Application for
Certified Instructor Designation
(IAAI-CI)

# *Applicant Information:* ☐ *Initial*   ☐ *Reciprocal*

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/CFITrainer.net username:_____

## Education & Work Experience (Minimum 30 points)

### Education Level/Points Claimed:

| | | |
|---|---|---|
| ☐ | **Associates Degree** | **10 points** |
| ☐ | **Bachelor of Arts/Science** | **15 points** |
| ☐ | **Masters of Arts/Science** | **20 points** |
| ☐ | **Doctorate of Arts/Science** | **25 points** |

Copy of diploma or college transcript attached?☐

### Work Experience Points Claimed (5 points/year):          Total Education & Work Exp. Points:

| | |
|---|---|
| *Current Employer:* | |
| *Position* | |
| *Address:* | |
| *Phone:* | *Supervisor:* |
| *Years of Experience* | *Dates:*<br>*From:*                    *To:* |
| **Letter from employer must be attached** | |
| *Previous Employer:* | |
| *Position* | |
| *Address:* | |
| *Phone:* | *Supervisor:* |
| *Years of Experience* | *Dates:*<br>*From:*                    *To:* |
| **Letter from employer must be attached** | |

IAAI Certified Instructor Application (last name): _____

## *Training Points (Minimum 70 points):*

**Please provide information regarding the training courses that you are submitting in support of your application for the Certified Instructor Program documenting a minimum of 70 points. Supporting documentation can either be contained in a transcript or on a course certificate. All training courses submitted as part of this application (except Instructor Course) must be tested training and must have been attended in the past five (5) years (3 years for renewal applications). Claim 1 point per hour of tested training. (NOTE: Qualifying Instructor Training courses should include a live instruction practical exercise.)**

| Course Title | Date | Hours/Points |
|---|---|---|
| Instructor Training Course(minimum of 24 contact hours) | | |
| CFITrainer.net-Ethics Module | | 3 |
| CFITrainer.net-Scientific Method Module | | 3 |
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| | Total Hours/Points: | |

Training Certificates attached? ☐
Training Transcripts attached? ☐

IAAI Certified Instructor Application (last name): _____

## *Practical Teaching Experience/Coordination Point (<u>Minimum 30 points</u>)*:

**Please provide supporting information documenting a total of 30 points of practical teaching experience and training coordination (minimum of 16 instructional hours required.) Supporting documentation should consist of letters of employment/reference or letters of appreciation issued by the host agency. The letters and/or certificates should clearly indicate the number of hours of training presented or coordinated.  All training courses submitted as part of this application must have occurred within the past five (5) years (3 years for renewal applications). Claim one (1)  point per hour of instruction/presentation and ½ point per hour of training coordinated.**

| Course Title | Date | I (1pt/hr) C/F (.5 pts/hr) | Hours | Points |
|---|---|---|---|---|
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| | | | Total Points: | |

Reference Letters attached? ☐

IAAI Certified Instructor Application (last name):_____

**<u>Additional Information:</u>**

IAAI Certified Instructor Application (last name):

## Points Calculation

|  | Min. Points | Points |
|---|---|---|
| Education/Work Experience Points | 30 |  |
| Training Points | 70 |  |
| Practical Teaching Experience/Coordination/Facilitation Points | 30 |  |
| Reference Points | 10 |  |
| **Total Points (Minimum 150 points)** |  |  |

Additional information regarding point calculations can be found in the IAAI-CI Program Manual.

**By submitting this application to the International Association of Arson Investigators, either through mail or electronic communications, the applicant certifies the information to be true and correct to the best of their knowledge and certifies that they have read and understand the program requirements. For electronic submissions, the accompanying e-mail will be considered as the applicant's signature and certification of the application. 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.**

**Name**                              **Signature**                              **Date**

Submit application, supporting documentation and credit card payment to IAAI-Training@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
16901 Melford Boulevard, Suite 101
Bowie, Maryland 20715

Application will be processed once payment is received.

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