



2025 IAAI-FIT Renewal Application

Effective May 1, 2025 International Association of Arson Investigators, Inc. Fire Investigation Technician Renewal

Before you begin this application, you will need to provide your payment number. Instructions on where to find this information can be found in the images below. IAAI-FIT applications will not be accepted without payment *

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Type in Payment Number Here

Member Portal	Membership Renewal	Member Directory	Certifications	Training	IAAI Foundation
	My Info	Membership		My Account	
	View Orde	r Details # 789456	Print Invoice	Credit Balance:	\$0.00
	Bill To	Ship To	Order Info Order ID: 78945		
			Date: 12/14/2024 Ship Date: P/O #:		
	Summary Information	ne Items Inv	Payments Installn	nents	
	Date	Payment ID	Tota	a.	

PLEASE NOTE THE FOLLOWING:

- Make sure to have all proper paperwork and credentials prepared before beginning the application process.
- It is highly recommended that you create a free Jotform account for online applications by clicking SAVE on this page and following the prompts.
 - You may use *any* email address you would like, as this is *not* linked to your FireArson.com account.
 - You will receive an email link to your personal application draft. This will allow you to save progress and return to edit and add documents if needed, prior to submitting your final application.
 - Drafts are saved for 2 months, so if you do not submit your application in that timeframe, it will be deleted.
 - If you have saved your application, and come back to upload documents, please be sure all documents have uploaded properly before submitting.
- Please allow up to 15 business days to receive a response of approval or rejection for your application.
- IAAI Member No.: Membership in the IAAI is not required. This information is requested to assist the staff in processing the application.

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IAAI Member No.

Date *

04/17/2025

Date

Name *

Sample

First Name with Middle Initial

Investigator

Address Line 2

Last Name

Address Line 1*

2331 Rock Spring Road

City *

Forest Hill

State *

Maryland

Country *

United States

Zip *

21050

Preferred Phone Number *

(555) 555-5555

Email *

certifications@firearson.com

example@example.com

Current IAAI-FIT Expiration Date *

07-16-2025

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Current Expiration Date

Excluding traffic violations, applicants shall disclose all convictions of violations of laws, statutes, ordinances, rules, regulations or canons. Disclosure is required regardless of whether an offense has been expunged, vacated, dismissed or

sealed. Please indicate below if you have a conviction to disclose. We will be in touch regarding next steps, if needed. *

No, I do not have any convictions tr \checkmark

Training

*

Please provide information regarding the training courses that you are submitting in support of your renewal application for the Fire Investigation Technician Program. - 80 hours of fireinvestigation-related training and education are required. - Up to 10% (8 hours) may be untested. - Supporting documentation can either be contained in a transcript or on a course certificate. - All documentation will be subject to approval. - Training must have been completed within the past 5 years.

		_	_
	Course Title	Date	Tested Hours
1	Course		8
2	Course		5
3	Course		8
4	Course		15
5	Course		26
6	Course		15
7	Course		5
8			
9			
10			
11			
12			
13			
14			
15			

Total Tested Hours

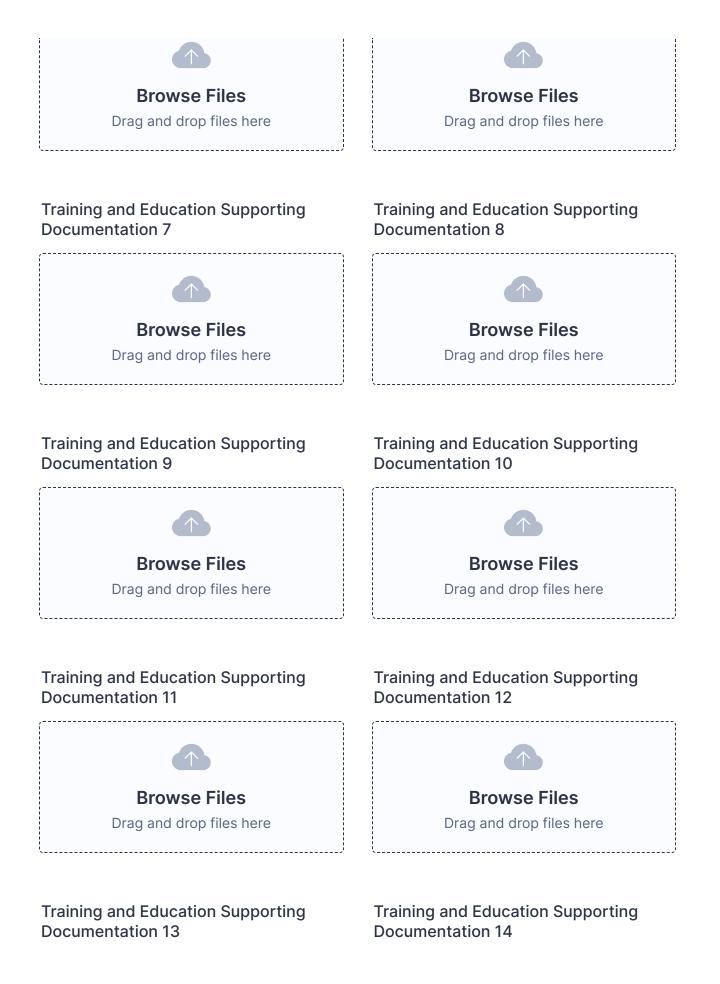
82

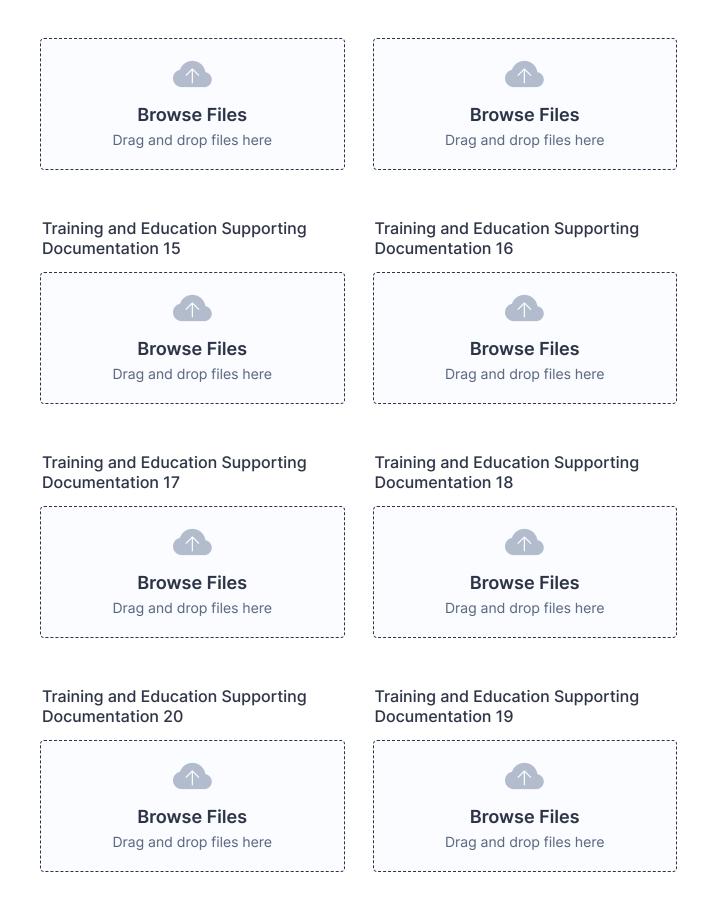
Total hours much reach a minimum of 80 hours.

Total Hours Must Reach a Minimum of 80 Hours.

Up to 10% (8 hours) may be untested.





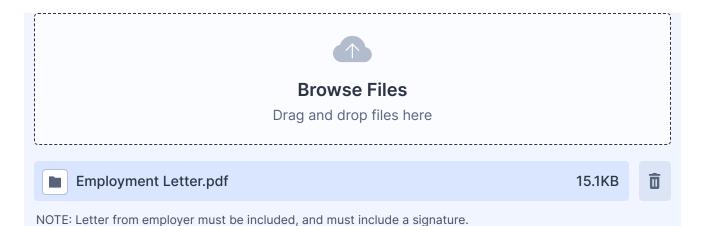


Work Experience

You must document a minimum of an additional 36 months of general experience in a fire investigation-related industry acquired during the preceding 5 years. Please provide documentation to support your experience such as a letter from your employer or employment records.

Current Employer *	Position *
ABC Fire Company	Detective
Company Address *	
2331 Rock Spring Road	
Supervisor *	Years of Experience *
T. Lawless	5
Dates: From *	Dates: To *
04/09/2020 贷	04/17/2025
Date	Date

Letter from Employer *



Previous Employer

Position

Provide if current employment is less than 18 months

Company Address

Provide if current employment is less than 18 months

Supervisor

Years of Experience

Provide if current employment is less than 18 months

Dates: From

MM/DD/YYYY

Provide if current employment is less than 18 months

Dates: To



Provide if current employment is less than 18 months

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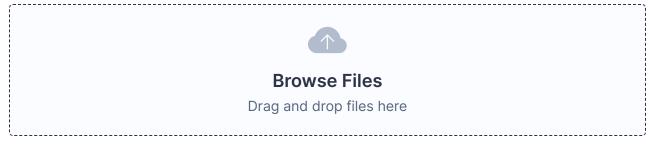
Letter from Employer 2



Browse Files

Provide if current employment is less than 18 months

	Drag and drop files here
Provide if current employment is less than	n 36 months
Transcript/ Other Training Cert	tificates



By submitting this application to the IAAI, with all required documentation, the applicant certifies this information to be true and correct to the best of their knowledge and certifies that they have read and understand the program requirements. 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.

Date *

04/17/2025	ŧ
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Date

Signature *

