ACADEMIA MEMBERSHIP SPONSOR FORM

Academia Member Applicant Name: _____

Sponsor Name _____

Sponsor Chapter_____

Briefly describe why you think the applicant is qualified for the Academia Membership:

_____

_____

_____

- **Full-Time/Part-Time College/University Student.** The Applicant is a full time or part-time College or University student (minimum of two classes per semester) and is studying for an undergraduate, graduate or doctorates' degree in criminal justice, criminal law, law, accounting or similar or related program at the College/University as determined by IAFCI. Students must provide a copy of their valid student ID and a letter from the school attesting that the student is enrolled.

  Send this form to support@iafci.org

***Internal use only**

*** Letter/Documentation received** ☐ YES ☐ NO

Explain what was received: _____

_____

An Academia Member application will be forwarded to the appropriate Chapter Membership Committee for approval if the Applicant does not have a Sponsor. The Chapter Membership Committee Representative must obtain the required eligibility information from the Applicant.

*** If the Chapter Membership Committee does not respond within thirty (30) days, the application shall be referred to International Membership Committee for review and approval.

Chapter Approver Name: _____ **Date:**

Signature: _____