International Association of Marine Investigators, Inc.

Instructor Application

Name:_____

Mailing Address:_____

City: _____ State/Province:_____ Country:_____ Zip: _____

Agency:_____

Agency Address:_____

City: _____ State/Province:_____ Country:_____ Zip: _____

Agency Phone:_____ Home Phone:_____ Alt Phone:_____

Fax Number:_____ Email: _____

Please send correspondence to (check one): _____Agency _____ Home

Please answer the following questions:

1. Have you been an active member of IAMI during the past 2 years? ☐ Yes ☐ No
2. How long have you been an IAMI member? Years_____
3. How many years of experience in your field do you have? Years_____
4. Have you conducted instruction with any other member of IAMI? ☐ Yes ☐ No Name:_____
5. What instructor level are you applying for? ☐ Instructor Card ☐ Instructor Gold Card

Please submit the following documents with your application:

_____ Applicant's resume

_____ List of courses taught in the last 2 years

_____ IAMI Instructor Database form

_____ Other supporting documents

Applicant's Signature:_____ IAMI #:_____ Date:_____

IAMI Instructor Sponsor:_____ IAMI#:_____

Please submit this application along with supporting documentation to:

IAMI Headquarters

711 Medford Center #419

Medford, OR 97504

866-844-4264 Fax: 541-857-8498