

## Crime Analyst of Illinois Association, NFP Dedicated to enhancing crime and intelligence analysis

## 2017 Application for Membership

Date:		New Member:	Renewal:
Applicant's Nam			Voars' ovnorionse as Analyst
			Years' experience as Analyst
Position/Title/Ra	nk/Division:		
Agency:			
Agency Address:			
Telephone Numl	er:		
E-Mail Address:			
RMS:			
Any Skills or Exp	rtise You Would Like to Share:		
THE SKINS OF EXPO	Tibe four Would Like to Share.		
Areas you would	like to receive training or refresher i		<u> </u>
Areas you would	be confident in presenting:		
Membership: (\$35.00)	Illinois Association, NFP - C/O J	effrey Edgar -Schaumberg Polic	rship of \$35.00 remittance to: Crime Analyst of the Department (1000 W Schaumburg Rd, Do NOT send cash through the mail.)
Payment Metho	l: □Cash □ Check / MO		
Association. I under position, as stated employment with	nembership in the Crime Analyst of Illino rstand that if, for any reason, my applica above, were to terminate, my members another law enforcement agency, or unt is my responsibility to notify the Vice Pre	ation is not accepted, a full re hip will be suspended until s il my current membership ex	efund will be made to me. Also, if my uch time as I provide proof of xpires, whichever comes first. I also
Signature of App	icant:		
Date:			f <b>Sensitive Information</b> nembership in Crime Analyst of Illinois , I agree

**2017 Board Members** 

Law Enforcement Sensitive information that I am exposed to, regardless of format or medium, shall be

disclosed by me only as necessary to members of other law enforcement agencies.