**PART A – PERSONAL DETAILS**

SURNAME:  FORENAMES:  KNOWN AS:

TITLE:  or OTHER  QUALIFICATION LETTERS:  DATE OF BIRTH:

ADDRESS LINE 1:

ADDRESS LINE 2:

ADDRESS LINE 3:  POST/ZIP CODE:  COUNTRY:

TELEPHONE: Home -  Work -  Mobile/Cell -

E-MAIL:  SKYPE NAME:

WEB SITE:

OCCUPATION:

EMPLOYER:

**PART B – I HEREBY APPLY FOR CERTIFICATE OF PROFESSIONAL COMPETENCE IN FORENSIC COLLISION INVESTIGATION AS AWARDED BY ITAI**

* I declare that I have read and understand the accreditation process as published on the ITAI website.
* The statements I have made in this application are true and I am prepared to verify them if required to do so.

Signed:

See [ITAI web site](http://www.itai.org/product-category/memberships/) for current fee rates: (GB Pounds Sterling only)

**[ ]** Payment made online at the above web address.

**[ ]** orby BACS transfer/payment to the following account:Sort Code 30-18-45

Account No 00420178

BIC LOYDGB21415

IBAN GB96 LOYD 3018 4500 4201 78

For alternative payments options please contact the Treasurer directly at: treasurer@itai.org

**PART C –YOUR QUALIFICATIONS AND EXPERIENCE APPLICABLE TO COLLISION INVESTIGATION** – Please include a details of qualifications relevant to accident/collision investigation; and evidence of complimentary qualifications/courses. This may take the form of a copy of your CV

**Part D – Include a copy of your CPD portfolio for the last two years to a value of at least 25 hours per year**

**Part E - Please supply one file relating to the case relied upon by you to demonstrate the quality of your work within the previous 3 years**

Please include documentation relating to the peer review of the selected case file; together with a briefing document of at least 750 words, describing the case and explaining why it has been chosen as an example of your quality of work, including any research required, problems encountered and lessons learnt.