THE INSTITUTE OF TRAFFIC ACCIDENT INVESTIGATORS



Sponsorship Appraisal

Applicant's Full Name:	Membership No:
Address:	
Sponsors Full Name:	Membership No:
Address:	
	ar knowledge of his/her work experience and level of expertise. The ee of involvement they have in it, particularly as it relates to 'Acciden
and have endorsed the copies that accompany the app	ne vetting process. I have examined the applicant's original certificates plication. I am aware that an appraisal forwarded under cover may a request to see it. I have read and I agree to be bound by the 'Rules for
, the undersigned, propose that the applicant be considere	d for transfer to Full Membership.
Name:	
Signed:	Date: