



Ohio Identification Officers Association

Application for Distinguished Membership

Name: _____
Last First M

Address: _____
Street City State Zip

Agency: _____

Member since Date: _____

Are you presently a member in good standing? (Check one) Yes _____ No _____

Have you ever been censured or otherwise disciplined by the OIO and/or the IAI
During your period of membership? (Check one) Yes _____ No _____

Applicant must meet the following criteria:

_____ A. Minimum of five (5) years of continuous paid membership

_____ B. Attendance at four (4) of the last five (5) annual division meetings
years: _____

C, One of the following criteria:

_____ Speaker or Workshop Instructor at an annual training conference(s) year(s)/locations/topic(s):

_____ Hosted an annual conference year/location: _____

_____ Held Elected Association Board position Office/year: _____

_____ D. Written and published an original article in the Association Newsletter Date: _____

Title and Subject: _____

Information verified: _____
Treasurer/Secretary Conference Chair Newsletter Chair

Approved BOD: _____
Date