



225 W.Wacker Drive, Suite 650, Chicago, IL 60606
Phone 312.265.2907 Fax 312.265.2908 www.forensic.org info@forensic.org

MEMBERSHIP APPLICATION

MEMBERSHIP APPLICATION APPROVAL CHECKLIST:

Please note that completing the application and paying the \$50 non-refundable application fee does not guarantee membership. The review process is typically completed within 30 days of application receipt. We appreciate your patience as we review your application.

- Complete and submit your application via email to info@forensic.org with payment information included for membership dues and application fee. If your application is not approved, your membership dues payment will be refunded.
Attach your Resume/CV.
Type your information using this fillable PDF application and save a copy to your computer.
Three positive references are needed for membership approval, but providing up to five will assist staff if some references are unresponsive.
Provide references who will be more likely, or more able to, respond in a timely fashion. Let them know that FEWA staff will be reaching out as part of the approval process.

APPLICANT INFORMATION

Form fields for Applicant Information: First Name, MI, Last Name, Certifications, Company Name, Area of Specialty, Street Address, City, State, Zip Code, Email, Website, Business Phone, Additional Phone, Fax, Credit Card No., Exp. Date, Billing Zip

MEMBERSHIP CLASSIFICATIONS

Annual Membership Dues - Summer Special\*

Table with 3 columns: Classification, Description, Annual Membership Dues - Summer Special\* (Price and Special Price)

\*For 2020 Membership Year, ending Dec. 31, 2020.

This Year - Next Year Renewal Rates\*

Professional - \$ 595 Professional Consulting - \$ 595
Associate - \$ 450 Affiliate - \$ 670

\*Replaces above rates. For 2020-2021 Membership Year, ending Dec. 31, 2021.

Would you like to renew through the end of 2021? Yes No



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**CHAPTER AFFILIATION PREFERRED**

- Arizona    Chicago    Dallas    Florida    Houston    Northern California    Los Angeles  
 Orange County    San Diego

**CONVICTIONS, SANCTIONS, REVOCATIONS**

Have you ever been convicted of a felony, sanctioned by a court of law, or had a license, permit, certification or professional accreditation revoked?  No  Yes, please attach an explanation.

**HOW DID YOU HEAR ABOUT US?**

- FEWA Website    Email    Colleague (Name: \_\_\_\_\_ )    Event    My Employer    Direct Mail    Print Publication  
 Facebook    Twitter    LinkedIn    Other

**REFERENCES**

- Professional Membership: Provide up to five (5) attorney references who have employed you as a forensic consultant and have provided testimonies and/or depositions.
- Associate Membership: Provide up to five (5) attorney and/or professional references.

Name	Email	Telephone	Mailing Address (Street, City, State, ZIP)

**QUALIFICATIONS**

*Completed by Professional Membership Applicants only.*

Date	Court Case No.	Case Title	Attorney (Name, Address, Telephone, Email)



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## FEWA Code of Ethics:

- Members shall refrain from conduct or practice which will discredit this association or the practice of forensic consulting.
- Members shall at all times impartially conduct business and personal activities with knowledge of and in compliance with governing laws and regulations pertaining to their individual professional discipline.
- Members shall expeditiously perform forensic services with due care, competence, and diligence only in the fields of their expertise.
- Members shall utilize standards and controls to provide services in a professional and scientific manner, and in doing so shall conduct objective examinations and analysis and be truthful in reports, statements and testimony.
- Members shall not untruthfully criticize or misrepresent the services of others, nor shall they intentionally attempt or otherwise encourage to injure through malicious or false acts, either directly or indirectly, the professional reputation, prospects, practice or employment of another member or peer.
- Members shall not attempt to obtain personal aggrandizement or business engagements by untruthfully exaggerating, embellishing or otherwise misrepresenting their credentials and/or qualifications.
- Members shall not permit themselves to be compromised by conflicts of interest with clients or allow the influence of others to override their objectivity.
- Members shall respect the confidentiality of information acquired during the performance of their service(s) and shall not disclose to a third party any confidential or proprietary information without appropriate and specific authorities.

## AFFIRMATION

- I certify that the information contained herein is true, complete and accurate to the best of my knowledge and belief. My signature authorizes the Forensic Expert Witness Association, or its representatives, to verify any and all information provided in connection with this application and the attached resume or CV.
- I hereby hold that the Forensic Expert Witness Association and its Board of Directors, representatives, all individuals, institutions, etc. harmless in connection with the verification of any or all information contained herein.
- If my membership in FEWA is accepted, I agreed to abide by FEWA's Code of Ethics.

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Name (*Print or type*)

Signature

Date