



FORENSIC CERTIFICATION MANAGEMENT BOARD

**Approved Training Application**

FCMB-19-2018-C

Certification:

Save and send completed  
form to:

**FCMBDirector@theiai.org**

This form is to be used by training providers seeking approval that their course or workshop will be accepted for credit toward the educational requirement of a specific certification discipline. Approval does not infer an endorsement or requirement by the certification board. Providers may state that courses/workshops have been approved for credit in their advertising. However, approval is not a license to use FCMB or IAI symbols, logos or trademarks.

**The following information is required for approval consideration**

Detailed course syllabus to include a breakdown of topics by hours

A current CV for each instructor to include their qualification to teach in the discipline

Name of course or workshop

Course description

Total number of class hours

Class type In person

Number of In person hours

On-line

Number of on-line hours

Recorded Video

Number of recording hours

Specific area of training

How is class performance measured

Training requested for

**Instructor information**

mm/dd/yy

Name

Discipline certified

Certification exp.

Name

Discipline certified

Certification exp.

Contact Person

Email

Best phone #

**For board use only**

Assigned  
Number

mm/dd/yy

Date request received

Received by

Approved

Date reviewed

Reviewed by

Date approved/denied

Total approved hours

Date applicant notified

mm/dd/yy

Reason for rejection (if appl)

Notes