

## 2024 Membership Renewal Form

As a premier organization for forensic examiners, your SAFE membership is contingent on more than your annual membership dues alone. Continuing members must renew their membership with evidence of their ongoing commitment to education in their field and within this organization. This requirement is demonstrated in the following point system.

SAFE Membership Level (Check of	one):Certified	Active	
My contact information is the same	e as last year		
Name		_	
Address			
City	State	Country	
Postal code			
Phone	Fax		
Cell Phone	E-mail		
Website			
\$95 enclosed. Make check	s payable to SAFE.	\$95 paid via PayPal.	
Send checks to: Dianne Peterson, Treasurer 370 South Lowe Avenue Suite A #225 Cookeville, TN, 38501	Reed Hayes, P.O. Box 2352 Honolulu, HI	Mail or email renewal form, CV & points to: Reed Hayes, Membership Chair P.O. Box 235213 Honolulu, HI 96823 reed@reedwrite.com	

Dues are due 1/1/24. Last day for renewal is 1/31/24.

## Please remember to submit:

1) Copy of your current CV2) Membership points (See attached.)

## **Points Required for Active Membership Renewal**

Members need 20 points to qualify for renewal.

Activ	<u>⁄ity</u>	<u>Points</u>
Attendance:	<del></del> -	
SAFE annual QDE confere Other organizations QDE c Other (non-QDE) conference SAFE continuing education Other organizations QDE v	onference ce in your professional fiel classes	(1ea)
Formal Education during this tin College course(s) pertainin College course(s) in non-Q QDE training course (appro	g to QDE DE field	(5) (2.5) (10)
Presenter /Lecturer /Teacher SAFE presentation (60 min SAFE presentation (30 min Presentation elsewhere on Trainer – Classes pertainin	utes) QDE topic (60 minutes)	(5) (2.5) (2.5) (5 ea/max 10)
Publications  SAFE Journal article  QDE Journal article publish  SAFE Newsletter article  QDE newsletter published  Research project published	elsewhere (provide article)	(2.5)
Testing Collaborative Testing Servi FDE or QDE Certification	ces Proficiency Testing	(5) (5)
Involvement within SAFE SAFE officer or Board Mem SAFE committee member	nber	(5) (2.5)
Miscellaneous Submit case history from ca Written review of document		d (2.5 ea/max 5) (2.5)
Signed:	Date:	otal Pts: