



## Professional Certification Program Criminal Intelligence Certified Analyst (CICA) Lifetime Application

**Respond in full to each question. *Incomplete applications will be returned.***

### Personal Details

Name (First, Middle, Last)

Home Address

City

State/Province/Region

Country

Postal Code

Phone Number

Email Address

IALEIA Membership Number

Number of Years Member

CICA Certification #

Number of Years CICA Certified

### Work Details

Agency/Company Name

Work Title

*Attach official job description if changed jobs within last 5 years.*

Number of Years in Position

Work Address

City

State/Province/Region

Country

Postal Code

Work Phone Number

Work Email Address

Supervisor Name/Title

Supervisor Phone Number

Additional Work Experience to Meet 15 Year Requirement. *List agency name(s), job title(s), and dates worked.*

## Select qualifying education and experience

Applicants must provide documentation of a minimum of 8 hours of continuing education hours/credits earned per year since last CICA certification/recertification. *Attach copies of all certificate and diplomas received for education and training.*

1. Course Completed	Date Complete	# of hours
2. Course Completed	Date Complete	# of hours
3. Course Completed	Date Complete	# of hours
4. Course Completed	Date Complete	# of hours
5. Course Completed	Date Complete	# of hours

## Qualifying Activities

Applicants for Lifetime certification must meet the specific qualifying activities of CICA recertification. Please note which three (3) activities were completed and attach applicable items.

### 1. Specific Qualifying Activity

Description/Details

### 2. Specific Qualifying Activity

Description/Details



### 3. Specific Qualifying Activity

Description/Details

## Applicant Certification

I hereby certify that all of the above information is true and complete.

Applicant Signature

Date

I have reviewed IALEIA's Code of Ethics and agree to adhere to these standards for ethics and professional conduct.

Applicant Signature

Date

## CICA Lifetime Certification Application Fee: \$150.00 (*non-refundable*)

To pay online by credit or debit card, please visit the [IALEIA Store](#)

To pay by check, attach fee here and mail completed application and check to: P.O. Box 13857, Richmond, VA 23225. *Make checks payable to IALEIA (Non-US checks must be on banks with US correspondent banks.)*

Applicants may also provide their credit card information for processing (*online submission is preferred*)

Card Type

Card Number

Name on Card

Expiration Date

CVV Code



**Professional Certification Committee Member Review (*for IALEIA/PCP Use Only*)**

Application Approved?

Yes

No

Approval Date

Certification Number

Certificate Mailed Date

*\* Remember to attach any necessary documents to the submission email.\**

**SUBMIT APPLICATION**