Law Enforcement and Emergency Services Video Association, Inc.

Application for Renewal Forensic Video Analyst

SIGNATURE



USD 25 RENEWAL FEE PAYMENT: Click **HERE** to fill out the credit card payment form. Name _____ Title _____ Organization City, State (Prov.) Zip (Postal) Code Phone: _____ E-mail address ____ Is your membership current? Yes It must have been and remain current during certification period. Qualification Criteria: I have met the requirements of Section 6 (Renewal) of the LEVA Forensic Video Analyst Certification Requirements and Process. All required documents are attached. I remain a full-time employee of a bonafide government agency and my responsibilities involve the processing of video images for investigation purposes. Or, I am a full-time employee of a non-governmental agency and my regular duties involve the processing of video images for investigation purposes. I further acknowledge I have read, understand and will continue to abide by the LEVA Forensic Video Analysis Certification Code of Ethics. SIGNATURE OF APPLICANT **DATE** Signature of senior agency officer attesting to the accuracy of the information provided and endorsing the renewal of this Certification on behalf of the agency.

IMPORTANT INSTRUCTIONS

TITLE

Complete this application form and, along with payment, a current CV or Resumé, email to LEVA Certification Program Manager, Mr. J.J. Ruano

Email: certification@leva.org