

TALEPI Membership Application

APPLICATION # _____

NOTE TO APPLICANT:

Thank you for your interest in becoming a member of this association. If necessary, use additional pages to provide the requested information. Any false statements are grounds for rejection. Please print or type all answers. Submit a check for \$25.00 to TALEPI with your application.

Complete this application from and mail to:

TALEPI

P.O. Box 1132

Richmond, Texas 77406

talepisecretary@gmail.com

Class Of Membership Requested:

Active Associate Affiliate Honorary

- *Active*: Employee of Government agency within Texas & with Texas Polygraph License
- *Associate*: Polygraph examiner from State or Federal agency outside of Texas (or any Texas licensed examiner who conducts exams for a criminal justice agency)
- *Affiliate*: Non-examiner interested in furtherance of the polygraph profession
- *Honorary*: Bestowed by vote of Board Of Directors (no dues)

Last Name, First Name, Middle Name (other names used)

Date of Birth Place of Birth (City, State, and/or Country)

Residence Address City State Zip

Business Address City State Zip

Preferred Mailing Address: Residence Business
(Important – must be updated for newsletters, mailings, etc.)

Home Phone Business Phone Fax (with area codes) Reliable Email Address

List all Polygraph Licenses you Possess (by State, License #, and Date Issued)

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BASIC POLYGRAPH TRAINING

Graduation Date	School	Address	City	State	Zip
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School Director	Intern Supervisor	Graduation Date	Applicant Years of Polygraph Experience
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Number of Law Enforcement Exams Conducted # _____

Professional Associations Applicant is member of (use separate paper, if needed)

Have you ever been denied a polygraph license? Yes No

Have you ever been denied entry into a polygraph school? Yes No

If answered "Yes", explain (use separate paper, if needed):

List three (3) polygraph examiner references: (include mailing addresses w/zip codes and phone numbers w/area codes)

Applicant Signature

Date

Processed By

Date