



# NATIONAL ASSOCIATION OF FIRE INVESTIGATORS

857 TALLEVAST ROAD, SARASOTA, FLORIDA 34243

1-877-506-NAFI 941-359-2800

## Certified Vehicle Fire Investigator Application Instructions and Checklist

1. Read Certified Vehicle Fire Investigator (CVFI) Guidelines and Handbook. Retain Guidelines and Handbook for future reference.
2. Complete pages 1-3 of the CVFI Application. Attach any supporting certificates, diplomas, or awards.
3. Copy your application and retain for your records
4. Bring a copy of your application with you to the NAFI Sponsored Training Program.
5. Mail your application materials to:  
Executive Secretary  
National Certification Board  
857 Tallevast Road  
Sarasota, FL 34243

Please allow 2-3 weeks for application processing and approval decisions, longer for international applications. You will be informed by mail only if your application is not approved by the National Certification Board.

After the NAFI office receives your completed test, please allow 2 weeks for processing.

The NAFI Membership Services staff is available Monday through Friday, 9-5 Eastern Time to answer questions regarding the Certified Fire Investigation Instructor Program, the application process, or the examination.



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## APPLICATION FOR NAFI NATIONAL VEHICLE FIRE INVESTIGATOR CERTIFICATION

OFFICE USE ONLY: Member No. \_\_\_\_\_ Certification No. \_\_\_\_\_ Date of Certification \_\_\_\_\_

Seminar \_\_\_\_\_ Approved \_\_\_\_\_ Pending \_\_\_\_\_

Name: Mr.  Mrs.  Miss  Ms.

First \_\_\_\_\_ Middle \_\_\_\_\_

Last \_\_\_\_\_

Name as you wish it to appear on NAFI records \_\_\_\_\_

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_ NAFI Membership # \_\_\_\_\_ IAAI Membership # \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth \_\_\_\_\_  
Month Day Year (City/Town, State/Province & Country)

S.S.N./S.I.N. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_

CHECK PREFERRED MAILING ADDRESS: HOME  OR BUSINESS

### Residence:

Home Telephone (\_\_\_\_) \_\_\_\_\_ Facsimile (\_\_\_\_) \_\_\_\_\_

Home Address/Street \_\_\_\_\_

City/Town \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

### Business:

Company Telephone (\_\_\_\_) \_\_\_\_\_ Facsimile (\_\_\_\_) \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address/Street \_\_\_\_\_

City/Town \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Current Title(s) \_\_\_\_\_

Number of Years and Months @ Co. \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_

Nature of Business \_\_\_\_\_

Description of Duties \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

FORMAL EDUCATION IN FIRE FIELD

Name of School	Courses Taken	Years Attended

FORMAL EDUCATION IN VEHICLE RELATED FIELDS

(Investigation, Mechanical, etc.)

Name of School	Courses Taken	Years Attended

SEMINARS AND IN-SERVICE TRAINING RELATED TO MOTOR VEHICLE FIRE INVESTIGATION

Subject Attended	Sponsor's Name	Dates

MOTOR VEHICLE FIRE INVESTIGATION EXPERIENCE

Total Number of Motor Vehicle Fires and Explosions Investigated \_\_\_\_\_

Note\*\* (If you do not know the exact number(s), write "~" for approximately and then the number)

Breakdown:

Number of Vehicle Fires Investigated \_\_\_\_\_

(Including Arson)

Number of Vehicle Explosions Investigated \_\_\_\_\_

(Including Arson)

Number of Vehicle Arsons Investigated \_\_\_\_\_

STATEMENT OF APPLICANT

I hereby make application to The National Association of Fire Investigators, National Certification Committee to be considered for certification as a Certified Vehicle Fire Investigator by signing this application and paying the tuition and certification fees.

As a member of NAFI, I agree to be governed by the Constitution, By-laws, rules, and Code of Ethics of the Association. I am of the opinion that I meet the requirements for NAFI Membership and Certification.

I have carefully read the National Certification brochure. I understand and agree to the certification requirements, including the following:

- 1 In order to be governed by the rules, Constitution, By-laws, and Code of Ethics of the National Association of Fire Investigators, I must remain a member in good standing of NAFI in order to keep the National Vehicle Fire Investigator Certification.
- 2 I understand that payment of the tuition fee does not insure certification.
- 3 The National Association of Fire Investigators, upon issuing certification, bears no liability for any nonfeasance, malfeasance, errors or omissions upon my part, which may be proven or alleged, based upon my performance as a Certified Vehicle Fire Investigator.
- 4 National Vehicle Fire Investigator Certification is based upon the results of the examination and evaluation of my professional qualifications by the National Certification Committee. I understand that the committee's decisions are final.
- 5 Application for certification may be made only once in any 6-month period.
- 6 I authorize The National Association of Fire Investigators to conduct background investigations of my professional credentials and qualifications based upon the information, which I have supplied in this application, in order to ascertain my fitness for certification and to respond to inquiries as to my certification, qualifications and character.
- 7 I understand that the examination is to be completed, by myself, without help or consultation with any other individuals. I may not consult any published materials or literature during the answering of the examination questions. A minimum of 75% correct answers on the examination is required for certification.
- 8 I understand and agree that inclusion of my name on the register of NAFI Certified Vehicle Fire Investigator is based upon active membership in NAFI, professional qualifications, passing the examination, and compliance with the NAFI Constitution, By-laws, rules and Code of Ethics. I may use as part of my professional qualifications that I am certified. I may direct inquiries about my certification to NAFI.
- 9 My signature upon this application demonstrates that I have read and understand all of the rules and regulations concerning NAFI, Vehicle Fire Investigator Certification, and that all of the information included on this application is true and correct.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

ATTENTION: Please Indicate the Training Program you will be attending

Location \_\_\_\_\_ Dates \_\_\_\_\_