

East Coast Gang Investigator's Association

Basic Certification Application

Incomplete applications will be returned.

Name: _____
(First) *(Middle Initial)* *(Last)*

Work Title: _____ Unit: _____

Agency: _____

Address: _____

City/State/Zip: _____

Office Telephone: _____ Cell: _____

E-Mail: _____

Supervisor's Name: _____

Telephone Number: _____ Email: _____

When did you start working in law enforcement? _____

How frequently do you attend intelligence meetings? _____

Which ECGIA recognized training conference have you attended? *(Include certificate w/application)*

Conference, Location & Date

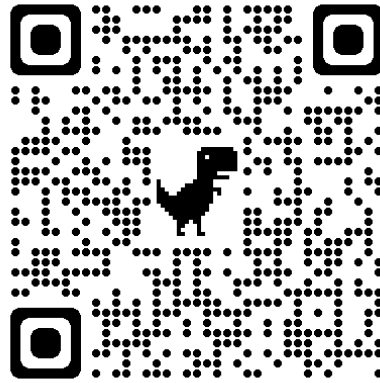
Email completed forms to certification@ecgia.org

Applicant's Certification: I hereby certify that all of the above information is true and complete

(Applicant's Signature and Date)

Send the **\$50 Basic Certification** fee by check to ECGIA, 688 Stony Hill Drive, Suite 22, Yardley, PA 19067. Checks should be made payable to East Coast Gang Investigator's Association, or use the links on page 2 to pay the fee online by credit card.

For Online Credit Card Purchases Use One of the Following Links:



[Basic Certification](#)