

# CLANDESTINE LABORATORY INVESTIGATING CHEMISTS ASSOCIATION

---

---

## Instructions For Membership Application

Thank you for your interest in the Clandestine Laboratory Investigating Chemists Association (CLIC).

Attached with these instructions are the Membership Application with Employment Verification, and CLIC Constitution and Bylaws. Please complete, print and sign the application, have your immediate supervisor sign it and email a pdf to [membership@jclic.org](mailto:membership@jclic.org).

Please read the Constitution and Bylaws, **especially Chapter 1 of the Bylaws** which details the different classes of membership offered by the Association. Select the class of membership you believe you qualify for and check the appropriate box on the application form.

If you are applying for Regular or Associate membership, please note you must submit a resume or curriculum vitae with your application. If your CV or resume does not include a **description of current clan lab duties and training** to support Regular membership, please include additional documentation such as training provided by your agency and approval to perform clan lab analysis.

You must include your employer issued email address **AND** a personal email address.

### Please Note:

Applications for Regular or Associate membership will NOT be accepted without a brief resume or curriculum vitae AND employer's signature in the Employment Verification section. Applications for Regular membership must support qualification for that membership class as described above.

**SEND NO MONEY WITH YOUR APPLICATION**

Please send your application package and supporting documents to [membership@jclic.org](mailto:membership@jclic.org) **no later than August 1** to be considered for membership during the current calendar year.

For more information, please contact the Membership Secretary:

Corinna Owsley  
Membership Secretary  
ID State Police Forensic Services  
700 S Stratford Dr  
Meridian, ID 83642  
(208) 884-7181  
[corinna.owsley@isp.idaho.gov](mailto:corinna.owsley@isp.idaho.gov)

# CLANDESTINE LABORATORY INVESTIGATING CHEMISTS ASSOCIATION

## Membership Application

First:	Last:	Job Title:	
Agency:			
Address:			
City:	State:	Zipcode:	Country:
Telephone: (Include country and city codes):		Fax:	
Email (Official):			
Email (Personal Secondary Address):			

### Membership Type:

- Regular                       I am an ABC member  
 Associate  
 Agency

(Note: If you are applying for Regular or Associate membership, you must attach a brief resume or curriculum vitae to support your application. Regular applicants may need additional documentation as described in application instructions.)

### Please select the following statement that best describes your present employment duties:

- I am** a law enforcement laboratory scientist currently involved in either the chemical analyses of clandestine laboratory evidence or clandestine laboratory scene response and investigation or both, and I am subject to testifying in courts of law due to my work.
- I manage**, either directly or indirectly, one or more law enforcement laboratory scientists currently involved in either the chemical analyses of clandestine laboratory evidence or clandestine laboratory scene response and investigation or both, and who are subject to testifying in courts of law due to their work.
- I am** a law enforcement laboratory scientist whose duties may require my unexpected participation in a clandestine laboratory seizure or investigation.
- I am** a sworn law enforcement officer or investigator responsible for the investigation and seizure of clandestine laboratories.
- I am** a paid law enforcement crime scene examiner.
- I am** a paid law enforcement latent fingerprint examiner.

I have read the Constitution and Bylaws of the Clandestine Laboratory Investigating Chemists Association and hereby agree to uphold them to the best of my ability. I also acknowledge the sensitive nature of the information that will be shared with and by the Association, and agree that such information will be safeguarded and used in a lawful manner.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Employment Verification

I hereby verify the above applicant for membership in the Clandestine Laboratory Investigating Chemists Association, is a paid full-time employee of the listed law enforcement agency or their laboratory. I further certify the investigation of clandestine laboratories is within the current job description of the applicant, and the applicant satisfies the membership requirements of the Bylaws of the Clandestine Laboratory Investigating Chemists Association.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Email: \_\_\_\_\_