



International Organic Inspectors Association

P O Box 6, Broadus, Montana USA 59317-0006

Phone/Fax: (406) 436-2031 E-mail: ioia@ioia.net Web: www.ioia.net

INSPECTOR MEMBERSHIP APPLICATION

Please print or type. Attach resume. The Membership Committee will, based on your training and experience, assign you to Supporting Individual or Inspector Member status. The information provided may be used in the IOIA Membership Directory. Before signing, be sure you read the IOIA Code of Ethics and Code of Conduct.

Criteria of acceptance, based on IOIA Bylaws, are:

- Formal basic inspector training.
- Training or experience in agriculture, processing, and/or trade.
- Review and approval by the IOIA Membership Committee.
- Completion of IOIA Membership Application.
- Understanding and acceptance of IOIA Mission Statement, Code of Ethics and Code of Conduct.
- Experience in inspection of organic farming, food processing, and/or trade. Minimum experience is documented in 1 of 2 manners: 1. Ten organic inspections performed, plus a letter from a certification agency attesting to completion of these inspections. OR 2. Five supervised inspections performed, plus a letter from a mentor inspector attesting to completion of these inspections.

Membership Level Requested: Inspector

Please do not complete this application unless you meet the criteria for Inspector Member. All other applicants should complete a Supporting Membership Application instead.

Full Name:

Full Address:

Telephone: Home

Business

Fax:

Email:

Date of Birth:

Gender (check): Male Female **Citizenship:**

Languages (under Learned, indicate degree of fluency - F for fluent, C for conversational):

Native

Learned

Education Completed (type of degree, year, school):

Occupation and Employment (past 3 years):

Organic Inspector Trainings Completed (check): Farm Livestock Processing

Date

Training Organization

Address

Phone/Fax

Two Professional References (name, address, phone/fax number):

Briefly explain your interest and commitment towards organic production

Briefly explain your interests and concerns in being a member of IOIA.

Approximate number of organic inspections performed: Farm Livestock Processing

Organic Inspection Experience:

Year(s) Certification Agency Year(s) Certification Agency

Type of Inspections Performed (check):

Farm: Cacao Citrus Coffee Cotton Field Crops/row crops Greenhouse Grower groups Herbs Honey Maple syrup Mushrooms Nuts Rice Small fruits Spices Sprouts Sugarcane Tea Tobacco Tree fruits Tropical crops Vegetables Vineyard Wildcrafting

Other:

Livestock: Aquaculture Beef Bison Dairy Eggs Goats Hogs Poultry Sheep

Other:

Processes: Baking Bottling Canning Cooking Decaffeination Dehydration Distillation Egg cracking Extruding Fermentation Flaking Freezing Fresh packing Hulling Ginning Grain cleaning Honey extraction IQF Juicing Malting Milling Oil extraction Pasteurization Retail Slaughtering Textile process Warehousing

Other:

Processed Products: Beer Cereals Chocolate Coffee Companion Pet Foods Dairy Products Flours Masa Multi-ingredient Nut butters Pasta Purees Sauces Soups Soy products Spices Sugar Tofu Vinegar Wine Vitamins/supplements Personal Body Care Products

Other:

Write a brief personal statement about yourself that adds to the above information you would like printed in the Membership Directory.

Are you interested in serving on an IOIA Committee? Yes No Please check:

Board of Directors Accreditation Bylaws Canadian Editorial Review Finance Fundraising Latin American Membership Scholarship

Do you give permission for IOIA to list your annual Membership Directory entry on the IOIA Website?

Yes No Note: IOIA requires your written permission. Without it, your listing will not be posted.

I hereby attest that all the above and attached information is true and accurate. I support the IOIA's Mission Statement and agree to follow the IOIA Code of Ethics and Code of Conduct. In the event of a dispute, the venue for resolution will be in Montana.

Signature: Date:

Please make check or money order for \$200.00 (US funds) annual membership dues payable to IOIA and send to:

IOIA, P.O. Box 6, Broadus, Montana, USA, 59317

1/13/04 Office use only: Received by Date Amount Received Training Verified Inspections Verified Initial Members. Level Member. Accept. Letter Mailed Date to Members. Com. Initial Members. Level Member. Accept. Letter Mailed

THANK YOU FOR YOUR SUPPORT!