



Institute of Certified Indexers

Promoting Quality in Indexing

www.certifiedindexers.com

Application for Certification For Indexers with 10 or More Years Experience as of 2010

Personal Information: *This section is required.*

Mr. ___ Ms. ___ Mrs. ___

Name (Last, First, Middle Initial): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Country, if Outside U.S.: _____

Email Address: _____

Phone Number (Day): () _____

Phone Number (Night/Weekend): () _____

Company Affiliation, if Relevant: _____

Indexing Experience: *Items with asterisk (*) are required.*

*Year Started Indexing: _____

*Proof of Indexing Experience: *Answer all relevant questions.*

Training Course & Year Completed: _____

Professional Membership: ASI Other _____

On-the-job Indexing – Name of Company, Position, and Years Employed:

*Provide on a separate page a list of 25 indexes (by title of book or project) you have completed in the past 5 years.

I hereby apply for certification from the Institute of Certified Indexers. I understand I must pay a grading fee and pass the qualifying examination to become certified.

Signature

Date

Submit this form and the required attachment with the non-refundable application fee of \$60.00 (check made payable to Institute of Certified Indexers) to:

**Institute of Certified Indexers
19266 Coastal Hwy., Unit 4 # 52
Rehoboth Beach, DE 19971**

Approval of this application form is a prerequisite to taking the qualifying examination.