EXPERIENCE OUTLINE *(For the last 5 years. Attach a bio or resume of additional information if necessary.)*

COMPANY NAME (1) _____ Employment Dates _____
Company Address _____
City _____ State _____ Zip Code _____
Region _____ Country _____ Postal Code _____
Phone (_____)_____ Fax (_____)_____
Responsibilities _____
_____

COMPANY NAME (2) _____ Employment Dates _____
Company Address _____
City _____ State _____ Zip Code _____
Region _____ Country _____ Postal Code _____
Phone (_____)_____ Fax (_____)_____
Responsibilities _____
_____

COMPANY NAME (3) _____ Employment Dates _____
Company Address _____
City _____ State _____ Zip Code _____
Region _____ Country _____ Postal Code _____
Phone (_____)_____ Fax (_____)_____
Responsibilities _____
_____

EDUCATION *(Real Estate education within the last 5 years)*

A. _____
B. _____
C. _____

OTHER PROFESSIONAL ASSOCIATIONS

A. _____
B. _____
C. _____

I do hereby apply for membership in the *Housing Inspection Foundation.* I certify under oath that the information contained within this application is true.

_____ _____
Signature Date

FOR CREDIT CARD CHARGES
☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover
Amount $_____ Expires _____
Card Number _____
Billing Address: ☐ Business ☐ Residence

The membership committee will review your application and may contact you for additional information.

Print Form