This entire application **must be completely filled out**; all six IACIS Certification Policy Requirements met, the application signed and datedby you and all verification of training (certificates, etc.) included in a single .pdf file **prior to submission.**  Other file type submissions (i.e.: zip files, doc, docx files, etc.) will be considered as incomplete and will not be accepted.

\*\*\*ATTENTION\*\*\*

PLEASE READ THE FOLLOWING:

* Only submit 60 Hours of Continuing Education Certificates. DO NOT SUBMIT EXTRA CERTIFICATES BEYOND THE 60 HOURS!
* Ensure your certificates list HOURS, certificates for Certification Tests will not be accepted.
* Only submit this application if you are applying for the current cycle. We will not accept applications for future cycles.
* If your Certificates for continuing education hours are NOT in English you must provide an English translation and annotate on the certificate where the hours are listed.

The Application Periods are:

• Cycle-1: March 1, through March 31

• Cycle-2: August 1, through August 31

The Proficiency Testing periods are:

• Cycle-1: April 1, through June 30

• Cycle-2: September 1, through November 30

To test in either cycle your application must be submitted and approved during the Application Periods listed above. **Applications will only be accepted during the application phase, and will not be accepted during the testing phase.**

**You must submit a signed, dated and completed application which includes all of the required training documents (verification of training). Remember, the completed application and required attachments must be received by the Recertification Committee in order to prevent your CFCE from expiring.** If these requirements have not been met by this date then your CFCE will be considered expired and you will need to start the CFCE process from the beginning in order to be current with your CFCE.

**If you have questions related to a requirement(s) please send an email to** **certadmin@iacis.com****. If you have a question during the testing phase, submit a message via the MOODLE system. Do not post recert testing related questions to the IACIS List serve.**

Candidates Name

Candidates Email

**(You must use the same email for all Recert correspondence and Moodle)**

Candidates City

Candidates State

Candidates Country

Is this a Non Re-certification Proficiency test (yes or no)?

Have you been previously issued a MOODLE Username?

**If you have not been issued a Moodle account one will be created and sent to you prior to the opening of the test.**

If yes to above, what E-mail is associated with the Moodle account?

**To reset your password use the reset password link on the Moodle site. If you no longer have access to that email address email** **moodleadmin@iacis.com** **to reset your password.**

If yes, what is your Moodle Username (DO NOT include your password)?

Please review your IACIS website profile and make sure that ALL information is correct.

(Contact secretary@iacis.com for any incorrect personal information or certification@iacis.com for any incorrect certification data)

If you plan to take the proficiency test as a **\*\**Non Re-Certification Proficiency\*\**** test then please fill out this form up to and including the Declaration of Independent Work and submit it to certadmin@iacis.com. You do not need to submit verification of training for a Non Re-Certification Proficiency exam.

 Name as it should appear on the Re-Certification certificate:

Your name as it appears on your IACIS website Profile (if different than above):

Complete date of your original CFCE certification:

Your CFCE certification ID#:

Date of your last CFCE Re-Certification – not including this test (if applicable):

E-mail address that can accept a “.pdf” attachment for your CFCE certificate (You MUST use the same email address that you used for your MOODLE account):

**DECLARATION OF INDEPENDENT CFCE RE-CERTIFICATION WORK PRODUCT:**

The IACIS Re-Certification Committee requires each CFCE re-certification candidate to satisfactorily complete the CFCE Re-Certification phase independently without assistance from any person(s). In order to renew your CFCE Certification you must first complete all information below.

CFCE Candidate’s Employing Organization:

CFCE Candidate’s Position/Rank/Title:

CFCE Candidate’s Telephone number:

Immediate Supervisor’s Name and Title:

Immediate Supervisor’s Telephone number and Email Address:

Telephone:  Email:

The undersigned CFCE Candidate hereby declares that the work performed and answers provided during the CFCE Re-Certification Practical Examination will be completed solely by the candidate without assistance from any person(s). The undersigned CFCE Candidate affirms that the information provided on this document is true and accurate to the best of his or her knowledge and is in accordance with the IACIS Code of Ethics.

CFCE Candidate’s Signature (Electronic Signature is acceptable) Date

**Requirement 1 – Proficiency Test**: One proficiency test must be successfully completed in the third year following initial certification or recertification (based upon the original CFCE year of issuance). Proficiency test results will not apply to recertification unless it was taken in the third year following initial certification or recertification.

List the year and cycle you are applying for:

**Requirement 2 – Professional Development/Continuing Education**: You must have satisfactorily completed sixty (60) hours of continuing education in the field of computer/digital forensics, information technology, or computer related investigations within the three (3) year period of your current CFCE certification (re-certification). This may include formal classes, online seminars, or other training opportunities (See “PLEASE NOTE” below).

Do not submit this Re-Certification Application with your verification of training until you have obtained the required 60 hours of training and can supply verification of the training.

\*\*In the event that you do not meet the 60 hour training requirement by the time of your submission, document on your application that you will meet that requirement prior to December 31st, in the year you are recertifying. You will be allowed to complete the proficiency testing process, however your recertification will be held in abeyance until you submit the remaining training documentation. If you fail to submit the training verification by December 31st, **in the year you are recertifying**, your Certification will expire. \*\*

Please complete the following fields concerning professional development or continuing education. All items MUST be completed and all information (to include the number of hours of training) **MUST** match the verification of training you attach to this form. Failure to follow these instructions will result in your application for re-certification not being accepted and being considered as incomplete. Do not group items – list them separately.

Insert PDF/Images of your completed training certifications to the last page of this document, please be mindful of file size. Please attempt to make your completed application no larger than 5MB. Utilize free software such as image resizing, Cute PDF or others to shrink your attachments, however, ensure they are still legible.

**In the event you have not obtained 60 hours of continuing education, document the hours you have completed to date. In the box below indicate that you have not yet completed the mandatory 60 hours. If you have completed 60 hours leave this box blank:**

**DO NOT ATTACH MORE THAN THE REQUIRED 60 HOURS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date(s)** | **Course Name** | **Location** | **# of Hours** | **Sponsor/Instructor** |
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**Requirement 3 – Work Relevance**: You must demonstrate that you are working in the field of computer/digital forensics by completing at least three (3) computer/digital forensic examinations, supervising or managing a related function, or completing three (3) proficiency tests within three years. Please describe your completion of this requirement.

**Requirement 4**: You must read and agree to uphold the current IACIS Ethical Code of Conduct and Professional Standards posted at <http://www.iacis.com>. This document can be found once you log into your IACIS account and navigate to My Dashboard/Member Resources/Policies.

“I hereby swear and affirm that I have read and agree to abide by the IACIS Code of Ethics”:

(Type Agree or Disagree)

**Requirement 5**: You must satisfy recertification fees as established by the Board of Directors. IACIS membership is not required in order to recertify as a CFCE.

1. If the certificant is an IACIS member and has maintained membership status by paying dues during the three-year cycle for recertification (a member in good standing), the recertification fee is hereby waived.

2 .Non-members or members who discontinued membership within the three-year certification cycle must pay recertification and/or proficiency fees as establish by the Board of Directors.

**Requirement 6:** You must submit this recertification application by December 31, in the year you are recertifying, 23:55 GMT to ensure your CFCE credential remains current. Failure to do so may result in your CFCE status being expired depending on your year of proficiency testing and your year of required re-certification.

For clarity, failure to recertify means you (the certificant) did not meet ***all*** six of the requirements outlined in this recertification application and outlined in the IACIS Certification Policy.

If you fail to satisfy all of the requirements of recertification as outlined in Section VII of the IACIS Certification Policy, in the third year from the date of your initial certification or last recertification, your certification will be classified as ***expired***.

All requirements of Section VII of the IACIS Certification Policy must be satisfied in order to maintain a certification in good standing. Once a certification has been classified as expired or revoked, the person must re-enter the certification program and satisfy all objectives as outlined by the certification program.

**I certify that the information I have provided is true and accurate. I hereby affirm that I performed the proficiency test unaided. I have read and understand the provisions of the IACIS Certification Policy.**

 CFCE Candidate’s Signature:  Date:

**Return this completed recertification application and your verification of training (certificates, etc) in a single .pdf document to** **certadmin@iacis.com****.**

**DO NOT POST QUERIES TO THE IACIS LISTERV!**