



The National Association of Medical Examiners®

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MEMBERSHIP APPLICATION CHECKLIST INVESTIGATOR AFFILIATE

As part of the NAME membership application process, you will be required to upload the following documents:

- Copy of your current curriculum vitae/resume
- Copy of your current ABMDI letter or certification
- If you are not ABMDI certified, a signed, recently dated letter of recommendation from a NAME Member or Fellow with whom you work closely is required

IMPORTANT: PLEASE USE YOUR PERSONAL EMAIL FOR YOUR MEMBERSHIP APPLICATION

Once you have gathered all required documents, please submit your application through our website. If you have any questions or need assistance, feel free to contact us at tsnethen@thename.org or call (816) 244-5160.

We appreciate your interest in becoming a NAME Investigator Affiliate and look forward to reviewing your application!