



**INDEPENDENT ORGANIC INSPECTORS ASSOCIATION  
INSPECTOR ACCREDITATION APPLICATION  
FOR RENEWAL OF ACCREDITATION**

The renewal application process is available to IOIA members who are accredited in at least one category and who have filed prior to the expiration date as stated on their Certificate of Accreditation. Please complete this application as thoroughly as possible and return it to IOIA along with the completed "Certifiers Inspector Evaluation Form(s)" and the appropriate fee. Use additional pages as necessary to answer questions and provide any other information you would like considered in your application for renewal accreditation by IOIA. Applicants who have allowed their certificate to expire must apply as an initial applicant.

The non-refundable application fee is \$30.00 for the first category in which the applicant is currently accredited plus \$10.00 for each additional renewal category. The fee is \$35 per category in which the applicant has previously applied and been denied. The fee for application in which the applicant has not previously applied is the same as for other new applicants. Reaccreditation will be granted for a period of three years. Successful applicants will receive documentation of their IOIA accreditation which will include an expiration date. It is the responsibility of the accredited member to be aware of this date and to reapply at the appropriate time. Pending review, there shall be no interruption in accreditation status when the application for renewal is received prior to the regular biannual Accreditation Review Panel deadlines of March 1 or October 1 preceding the expiration date. If no renewal application is received by the expiration date, accreditation shall be suspended. Mail your application with a check or money order in US funds to IOIA, P.O. Box 6, Broadus, Montana, 59317-0006, USA.

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone, fax:** \_\_\_\_\_

**Categories in which you seek IOIA Renewal Inspector Accreditation:**

**Crops :**  **Livestock:**  **Handling (Processing):**

**COMMITMENT**

Has your commitment to organic production changed since you completed your last application?

**Yes:**  **No:**  If "yes" please briefly elaborate on attached pages. In addition, please provide a brief commentary, based on your inspection experience, on the subject of organic standards and the certification process.

**RELATED EDUCATION**

Have there been significant changes in your related education or work experience?

**Yes:**  **No:**  If "yes" please briefly elaborate on attached pages.

**CONTINUING EDUCATION**

List continuing education events you have attended over the past three years, or individualized study you have done such as books, journals, etc. As stated in the Accreditation Program, these events or study must include both conventional and organic aspects relating to each category for which you are applying. IOIA trainings in addition to the one required in the past three years are considered continuing education. On a separate page, please explain the relationship of your continuing education to inspection work in the category if the information is not related in an obvious way. If you attach brochures, agendas, or other supporting written information, please highlight the relevant areas.

Date					
Sponsor					
Title					
Hours					
Category of accreditation					
Organic/ conventional					

**INSPECTION EXPERIENCE**

The minimum number of inspections required is 5 crop inspections for renewing crops accreditation, 3 livestock inspections for renewing livestock accreditation, and 3 processing inspections for renewing processing accreditation. At least one inspection per category must have occurred within the last year. Grower groups are counted as 3 inspections in the appropriate category.

**Number of Inspections Completed**

**Individual Inspections**

**Grower Groups**

Individual Inspections			Grower Groups		
Crops	Livestock	Processing	Crops	Livestock	Processing

List all certification organizations for whom you have worked in the past three years:

**IOIA-APPROVED TRAINING**

List the location, date, category of IOIA-Approved Trainings attended within the last 3 years and whether you received a Certificate of Completion.

Date	Location	Category	Received Certificate of Completion

Please feel free to add any additional information which you feel is pertinent to your application.

**CERTIFIER’S INSPECTOR EVALUATION FORM**

The enclosed form must be completed by all certifiers with whom you have worked in the last three years. You may return it with your application or the certifier may forward it directly to IOIA. All forms need to be returned to IOIA before your application is reviewed by the ARP. It is the member’s responsibility to see that they are received by IOIA.

**I attest that the above information is true and accurate.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**