

# AAI Trainee Certification Form



**This form must accompany course registrations from trainees.**

**Please print legibly or type.**

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Trainee Status (check one): \_\_\_\_\_ Predoctoral -- Year Degree Expected: \_\_\_\_\_  
\_\_\_\_\_ Postdoctoral -- Year Degree Received: \_\_\_\_\_

## **Advisor's/Department Chair's Certification of Applicant's Trainee Status:**

I hereby certify that \_\_\_\_\_  
*Name of Trainee*

**is a registered predoctoral / postdoctoral student.**

\_\_\_\_\_  
*Name of Advisor/Department Chair*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_