

Site Visitor Application

Name: _____ Date: _____

Affiliation and category of membership (AIA, ASID, IIDA, IDC, IDEC): _____

Design education (include Degree/Certificate and Institution): _____

Business/firm name: _____

Business address: _____

Business telephone: _____

Area of expertise: _____

Home address: _____

Home telephone: _____

Email: _____

Please provide the names, addresses, and telephone numbers of the two professional references whom you have asked to send written recommendations:

First reference:

Name: _____

Phone: _____

Email: _____

Mailing address: _____

Second reference:

Name: _____

Phone: _____

Email: _____

Mailing address: _____

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Please answer the following question: What is your philosophy of professional education and how does this relate to the Council for Interior Design Accreditation Standards and/or the accreditation process?

Please attach a copy of your resume/vitae. Applications received without an attached vitae will not be considered. All complete applications will be reviewed in order to fill available openings.

Return application to: Council for Interior Design Accreditation
206 Grandville Avenue, Suite 350
Grand Rapids, MI 49503-4014
laura@accredit-id.org