

# **Board of Forensic Document Examiners**



**Application**

**Required Forms**

**2011**

**Thank you for requesting an application packet to apply for the BFDE certification testing.**

The packet is divided into three parts.

(1) **Required forms**

R101—Application	R105—Current Employment
R102—Code of Ethics	R106—Confidentiality Agreement
R103—Code of Professional Responsibility	R107—Audit Permission
R104—Certification Policies	R108—Training Inventory

(2) **Information pages**

These pages contain information about the prerequisites, definitions of terms used by the BFDE, an explanation of the certification process and certificate maintenance requirements. Please read before filling out your application.

(3) **Optional forms**

These are included for your convenience. Use the optional forms if they are applicable to your training/education. If not, do not use them.

**To expedite processing**, answer the questions on the application as completely as possible and provide as much information as possible to document the answers where requested. If additional information is necessary, you will be contacted. We recommend that you use 3-ring binder format to submit your data. Please remember that all information provided is subject to verification.

**The application** must be filed no less than 120 days prior to the requested testing date. Applicants will be notified of the status of their application as soon as possible. The annual test is offered in the Fall of each year; see [www.bfde.org](http://www.bfde.org) for the current schedule. Testing is also available on other dates through a University Testing Center, by arrangement with the testing administration agency (ORA).

**Mail** the completed application, documentation, and a \$100 non-refundable application fee to:

John Hsueh  
BFDE Administrator  
3119 East Menlo St.  
Mesa, AZ 85213

e-mail: [shoe1705@hotmail.com](mailto:shoe1705@hotmail.com)

**A Study Guide** will be furnished in Adobe .pdf format upon completion of the application process.

**Testing Fee.** Upon fulfilling all application requirements, the Administrator will notify the Applicant that he/she has a confirmed seat for testing. The testing fee of \$500.00 is due within ten days of notification.

**Annual Maintenance Fee:** The annual maintenance fee helps support the board's activities. The maintenance fee is due and payable in January of each year. It shall incur the first January following one's certification date. The maintenance fee is revisited annually at the BFDE board meeting and can be adjusted up or down as the requirements and/or activities of the board may change. The current annual fee is [inquire].

# Board of Forensic Document Examiners

## APPLICATION FOR CERTIFICATION

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Name \_\_\_\_\_ Agency \_\_\_\_\_  
Business Address \_\_\_\_\_ Title \_\_\_\_\_  
\_\_\_\_\_ Bus. Phone \_\_\_\_\_  
Residence \_\_\_\_\_ Res. Phone \_\_\_\_\_  
\_\_\_\_\_ Fax Phone \_\_\_\_\_  
Date of Birth \_\_\_\_\_ e-mail \_\_\_\_\_  
Social Security Number \_\_\_\_\_ web site \_\_\_\_\_

### PLEASE ANSWER THE FOLLOWING QUESTIONS

- (1) Are you a citizen of the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No  
(1a) If not, please indicate the country in which you hold citizenship. \_\_\_\_\_
- (2) Have you ever been convicted of a crime (excluding traffic offenses other than DUI or DWI)?  
\_\_\_\_\_ Yes \_\_\_\_\_ No  
(2a) If yes, explain. \_\_\_\_\_
- (3) Is document examination your primary occupation or main assignment area if employed in a laboratory?  
If your answer is "no," please answer the following questions:  
(3a) What is your primary occupation / assignment? \_\_\_\_\_  
(3b) What percentage of your time is devoted to document examination? \_\_\_\_\_  
(3c) If document examination relates to your primary occupation, explain how it relates. \_\_\_\_\_  
\_\_\_\_\_
- (4) In which publications and/or web sites do you advertize your services? \_\_\_\_\_  
\_\_\_\_\_
- (5) What year did you begin practicing as a document examiner? \_\_\_\_\_
- (6) Do you do civil case work? \_\_\_\_\_ Yes \_\_\_\_\_ No
- (7) Do you do criminal case work for defense attorneys? \_\_\_\_\_ Yes \_\_\_\_\_ No
- (8) Do you do case work for a Public Defender agency(s)? \_\_\_\_\_ Yes \_\_\_\_\_ No

(9) Do you do case work for a law enforcement agency(s) \_\_\_\_Yes \_\_\_\_No

(10) Do you accept court assigned cases? \_\_\_\_Yes \_\_\_\_No

(11) What is your approximate annual case load? \_\_\_\_\_

(12) How many times have you testified as an expert in handwriting or document examination? \_\_\_\_\_  
(13a) How many times did you testified in the previous year? \_\_\_\_\_

(13) Check the areas in which you have provided testimony in deposition, in arbitration, or a court of law.

- Handwriting
- Ink Analysis
- Restoration of documents
- Hand printing
- Paper Analysis
- Photocopiers/office machines
- Altered documents
- Printing processes
- Mechanical Impressions
- Age/date of documents
- Line Sequence
- Other (list) \_\_\_\_\_

(14) Have you ever testified as an expert witness in any other field and, if so, in what field(s)?

\_\_\_\_\_

(15) Have you ever been disqualified as an expert witness? \_\_\_\_Yes \_\_\_\_No

(Disqualified means that your credentials were not accepted by the court. It does not apply to motions to exclude your testimony for various technical reasons raised by counsel or other situations in which your credentials were not the issue.)

If your answer is "yes", you may attach another sheet explaining the circumstances or you may personally provide the details to the Administrator, who may or may not request a written explanation.

(16) Have you testified opposite an FDE certified by an FSAB accredited board within the last five years?  
\_\_Yes \_\_No If yes, how many times within the last five years? \_\_\_\_\_

(17) Has a court ever ruled that you could not testify as a result of a Daubert challenge? \_\_\_\_Yes \_\_\_\_No  
Please provide the case docket information and explain the ruling on a separate sheet.

(18) If you were ever named in a law suit with regard to your professional work, professional conduct or ethics as a document examiner and the case either settled out of court or you were found guilty, please read the following.

*You are not required to write your answer on this application, but if your answer is "yes", then as part of this application process you are required to disclose this information to the Administrator and explain the circumstances. The Administrator may request detailed information. If you neglect to do so, you will be considered as intentionally not disclosing this information. Your disclosure may or may not impact the assessment of your application. Your non-disclosure will have consequences at any time that such information is brought to the Board's attention.*

(19) Have you ever been found guilty of an ethics violation by a professional organization? \_\_\_\_Yes \_\_\_\_No

*If yes, you are required to discuss the particulars with the Administrator and supporting document may be required. If you neglect to do so, you will be considered as intentionally not disclosing this information. Your disclosure may or may not impact the assessment of your application. Your non-disclosure will have consequences at any time that such information is brought to the Board's attention.*

(20) Do you maintain your own laboratory for the examination of documents? \_\_\_\_Yes \_\_\_\_No

(21) Do you have the following equipment in your laboratory or have unlimited access to the equipment?

- (a) optical aids  Yes  No
- (b) a stereo microscope  Yes  No  
with oblique and ring or coaxial lighting
- (c) infrared imaging equipment  Yes  No
- (d) ultraviolet light source  Yes  No
- (e) latent imaging equipment  Yes  No
- (f) digital imaging equipment  Yes  No
- (g) measuring reticles  Yes  No
- (h) transmitted light table  Yes  No
- (i) PhotoShop or other  Yes  No  
computer imaging software program

Other \_\_\_\_\_

(22) Have you written any articles about document examination subjects that were published in a peer reviewed professional journal?  Yes  No

List the journals. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(23) Have you written any books, chapters in books or monographs?  Yes  No  
List titles, publishers and years published.

\_\_\_\_\_  
\_\_\_\_\_

(24) Have you authored, co-authored, or contributed to a course on handwriting or document examination?  
List course(s), year published, and include outline of subjects.

\_\_\_\_\_  
\_\_\_\_\_

(25) Do you do training or offer courses in any aspect of document examination?  Yes  No  
If yes, please discuss. Use additional paper, if necessary.

\_\_\_\_\_  
\_\_\_\_\_

(26) Have you have presented papers at professional conferences?  Yes  No  
List the organizations.

\_\_\_\_\_  
\_\_\_\_\_

(27) List the professional associations in which you currently hold membership.

\_\_\_\_\_  
\_\_\_\_\_

(28) List any offices held in these professional associations. \_\_\_\_\_

\_\_\_\_\_

(29) List any certification(s) that you currently hold, the sponsoring organization, the year obtain, and whether you passed testing to earn your certificate. If testing was not required, explain the basis for receiving the certification.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DOCUMENT EXAMINATION TRAINING**

The following areas concern your training as a document examiner. Do not just include your resume in response to this question. Submit as much detail as you think is necessary for the Administrator to have a clear understanding of your training. Before you begin, please read the document titled "Definition of Terms as Applied to Training History" so that your answers correspond to the Board's understanding of terms listed.

(30) Which method(s) best describe how you receive the majority of your training?

**Apprenticeship / On-the job**

\_\_\_\_\_  
*List instructor's name, address, phone, agency (if applicable)*  
*Use separate paper to describe training*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mentorship/Tutorship**

\_\_\_\_\_  
*List mentor's name, address and phones, agency (if applicable)*  
*Use separate paper to describe training*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submit any certificate of training or other documentation of completed training.  
Submit a course outline which describes your study. If you do not have a course outline complete the *Document Examiners Training Inventory* form that is included in this application packet.

(31) How long was your training period? \_\_\_\_\_

(32) Have you attended courses on document examination or related areas offered by an accredited college or university or private institution? If so, list courses, sponsor, addresses, dates, and the name of individual(s) presenting the course. Attach copies of grades, transcripts or certificate of completion for institution courses.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(33) List any sources of continuing education in questioned document examination. Attach additional sheets as needed.

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**EDUCATIONAL BACKGROUND**

High School \_\_\_\_\_ Year Graduated \_\_\_\_\_

City/State \_\_\_\_\_

College/University \_\_\_\_\_ Degree \_\_\_\_\_

Year \_\_\_\_\_

College/University \_\_\_\_\_ Degree \_\_\_\_\_

Year \_\_\_\_\_

College/University \_\_\_\_\_ Degree \_\_\_\_\_

Year \_\_\_\_\_

If there is any other information that you want the Board to consider in relation to your training, please indicate below or attached a separate sheet of paper and mark "see attached".

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**ATTACH THE FOLLOWING AS PART OF YOUR APPLICATION.**

- (1) Current resume / CV
- (2) Your professional letterhead
- (3) Current business card
- (4) Copy of all advertisements within the last two years, including Internet (if applicable).
- (5) Signed statement supporting the BFDE Code of Ethics and Professional Responsibility (form included)
- (6) Signed statement regarding the BFDE Polices and Procedures Manual (form included)
- (7) Declaration of current employment (form included)
- (8) Copy of college diploma
- (9) Federal Rules of Civil Procedure, Rule 26 (a)(2)(B) list of testimony provided within the last four years

**PLEASE READ CAREFULLY THE FOLLOWING PARAGRAPHS BEFORE YOU SUBMIT YOUR APPLICATION.**

Based on the answers provided in this application, it is understood that additional information or documentation may be requested by the Board. Any additional information provided will be considered part of this application. Information provided in this application is subject to verification.

The applicant understands that processing of the application and confirmation by the Board that the applicant meets its requirements to sit for testing does not guarantee that the applicant will receive Board Certification, and that Board Certification and/or any other recognition awarded is based solely on passing all the required testing and satisfactorily completing any other required activities.

The applicant understands that Board Certification is valid for a five year period and that every fifth year the certificate holder must apply to renew his/her board certification. Certification renewal requires fulfilling the requirements then existing and being in good standing with the Board concerning ethical behavior and current in all fees owed to the Board. The applicant agrees that the certificate remains the property of the BFDE.

The Applicant understands that Board Certification by the BFDE does not constitute an endorsement by the BFDE of the certificate holder's work product, opinions rendered, or skill as an expert witness. Board certification attests to the fact that the certificate holder had the knowledge, skill, and ability required to pass testing as prescribed in the program sponsored by the Board of Forensic Document Examiners. By renewing the certificate, the BFDE is recognizing that the certificate holder has fulfilled the current requirements for certificate renewal.

By submitting this application the applicant agrees that he understands the Certification Program and will comply with its requirements.

The applicant agrees to defend, indemnify and hold harmless the BFDE, it's officers/directors, agents, test administrators, and scorers, and any other individual participating on behalf of the Board from any and all actions resulting from the Applicant's failure to pass testing, failure to meet the requirements for certificate renewal, failure to uphold the Code of Ethics or Code of Professional Responsibility, and with respect to, but not limited to, any actions taken by the Board which causes reprimand, suspension, revocation of my certificate for breach of the Code of Ethics or Code of Professional Responsibility.

The applicant states that the information provided herein is true and accurate to the best of his/her knowledge. The applicant grants permission for a background check and other activities to verify the information submitted as part of the application process. The applicant acknowledges that any material misrepresentation of the fact is cause for denial of the application or revocation of certification should the misrepresentation be brought forward after a certificate has been issued.

Date\_\_\_\_\_

Signature\_\_\_\_\_



# CODE OF ETHICS AND PROFESSIONAL RESPONSIBILITY

## Board of Forensic Document Examiners

As a Board Certified Forensic Document Examiner, I hereby accept the BFDE Code of Ethics and Professional Responsibility (revision 2012) and pledge to adhere to the guidelines and constraints set forth in this document.

I confirm that I received a copy of and have read the BFDE *Code of Ethics and Professional Responsibility* before signing this document. I understand that revisions may be made the Code of Ethics and Professional Responsibility, from time to time, and agree to accept and be bound by such revisions upon publication by the BFDE of said revisions and receipt of a copy of the revised Code.

I understand that if a complaint for any breach of the Code of Ethics is made against me, the Ethics Committee of the BFDE shall have jurisdiction to review and take action on the complaint. The complaint will be processed according to Section 17 of the BFDE Policies Manual.

I will have the opportunity to present information to rebut any complaint alleging the breach of the Code of Ethics and Professional Responsibility before the Ethics Committee. The Ethics Committee shall weigh the evidence and information presented to it and make a recommendation to the Executive Board of the Board of Forensic Document Examiners.

I agree that the Executive Board of the Board of Forensic Document Examiners shall decide the ultimate validity of the complaint and shall have the right to impose sanctions against me, up to and including revocation of my board certification and/or any other status.

I agree that I shall accept as final the decision of the Executive Board of the Board of Forensic Document Examiners as binding in all matters concerning my board certification and/or any other status.

Agreed to on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature\_\_\_\_\_

\* This document can be found in the [Information Pages](#) of the Application Packet.

# Certification Examination and Certification Renewal Process

## Board of Forensic Document Examiners

I confirm that I have received a copy of the document titled *Certification Examination and Certification Renewal Process* \* and that I have read same. I understand that revisions may be made certification program, from time to time, and such revisions could change the requirements for certification renewal. I understand that all certificate holders will have to meet the requirements as amended in order to maintain certification status. If I choose not to comply with amended policies or am unable to comply, I understand that my certification will not be renewed.

Date \_\_\_\_\_

Signature \_\_\_\_\_

\* This document can be found in the Information Pages of the Application Packet.

## Declaration of Current Employment

In the matter of my application to the Board of Forensic Document Examiners, I make the following declaration.

I am currently engaged in the profession of forensic document examination and have been so engaged since \_\_\_\_\_(year).

Since the stated date, I have worked regularly in the profession, offering my services to those clients who typically seek the services of a forensic document examiner or performing document examinations for a law enforcement agency.

Date \_\_\_\_\_

Signature \_\_\_\_\_

# CONFIDENTIALITY AGREEMENT

## Participant in Testing

### Board of Forensic Document Examiners Certification Testing Program

In order to assist in maintaining the integrity of the testing procedure, I pledge that I will not discuss the written test questions or the performance examination cases with anyone other than the test administration individual(s) or officers of the Board of Forensic Document Examiners.

I agree that my confidentiality is essential to maintaining the integrity of the testing program, so that no candidate has an advantage based on prior knowledge of any of the test contents.

This is my solemn pledge given on the \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_.

\_\_\_\_\_  
Signature

## Permission to Audit File

A certifying body that receives accreditation from the Forensic Specialties Accreditation Board (FSAB) may be required to make available to FSAB a percentage of its files of certified individuals for auditing purposes.

The purpose of the audit is to confirm that the certifying body (the BFDE) is properly following its own By-Laws and certification standards during its evaluation of the applicants application and in awarding certification and certification renewal. The BFDE would confirm that any member of FSAB reviewing applicant files has signed an oath of confidentiality not to disclose any information, not in the public domain, about the certified individual that may be learned as a result reviewing his/her file during an audit.

By signing this document, the applicant is granting permission to the BFDE to release his/her file information to any accrediting agency of the Board pursuant to its quality system review process.

Date \_\_\_\_\_

Signature \_\_\_\_\_

BFDE: R107—Audit Permission

# Forensic Document Examiners Training Inventory

**Instructions:** Use this document to identify the areas of study/training/education that you received by placing a check beside the appropriate subject, under the appropriate heading. This form should represent your skills as of the date of this application.

A. Foundation Skills	Subjects included in study /training	Currently perform examination	Refer task to another agency or colleague
1. Knowledge of Handwriting Methodology (e.g. programming of writing movement, information processing, basic motor programming)			
2. Knowledge of Handwriting / Hand Printing Identification (handwriting, hand printing characteristics) (e.g. line quality, pressure, connective, rhythm)			
3. Knowledge of Inks (e.g., various kinds of ink, ink testing procedures, ink dating procedures)			
4. Identify Various Writing Instruments			
5. Knowledge of Fonts and Type Styles			
6. Knowledge of Paper (e.g., manufacturing process, physical characteristics, watermarks)			
7. Knowledge of Printing Devices (e.g. typewriters, laser printers, ink jet printers)			
8. Knowledge of Forms and Letterheads			
9. Knowledge of Comparative Analysis Techniques (e.g., evaluation of similarities, differences)			
10. Ethics and Professionalism (familiarity with BFDE Code of Professional Responsibility, the limitations of document examination)			
<b>B. Gathering Evidence</b>			
11. Maintaining Chain of Custody (evidence handling)			
12. Collect Standards of Comparison (handwriting/signatures)			
13. Collect Standards of Comparison (other media)			
14. Verify Accuracy of Document Data			
15. Analyze Document Formatting			
<b>C. Analyze Handwriting</b>			
16. Examine cursive writing (including signatures) (e.g. various kinds of forgery, characteristics of genuine writing/signatures)			
17. Examine Hand Printing (alpha and numeric)			
18. Recognize influences on Handwriting Skills (internal and external)			
19. Identify Letter Design Influences			
20. Recognize Disguised Handwritten Images			
21. Examine Graffiti			
22. Determine Line Sequence and Direction of Writing Movement			
<b>D. Analyze Falsified Documents</b>			
23. Determine Document Altering Techniques			
24. Identify Counterfeited/Fabricated Documents			
<b>E. Analyze Features of Paper and Media</b>			
25. Identify Watermark Characteristics			
26. Identify Types and Characteristics of Paper			
27. Identify Physical Characteristics of Paper			
28. Access Production Characteristics of Paper			
29. Assess Physical Condition of Paper (current)			

	Subjects included in study /training	Currently perform examination	Refer task to another agency or colleague
<b>F. Analyze Impact and Non-Impact Images</b>			
30. Analyze Copy Machine Images			
31. Analyze Latent Images			
32. Analyze Fax Machine Images			
33. Analyze Printer Images			
34. Analyze Typewriter Images			
35. Analyze Imaging Devices (rubber stamp, auto pens, embossing seals)			
36. Analyze Non-Impact Pre-Print Images			
37. Analyze Credit Card/Check Security Features			
<b>G. Using Lab Instruments</b>			
38. Use Microscopes and Magnifiers			
39. Use Videospectrum Devices (such as infrared and ultraviolet, including filters)			
40. Use Electrostatic Detection Device			
41. Use Photography (Digital, 35mm)			
42. Use Light Sources (including various filters)			
43. Use Digital Image Equipment			
44. Use Photocopiers			
45. Use Measuring Devices			
46. Other Equipment (applicable to document problems)			
<b>H. Evaluating Evidence and Presenting Case Findings</b>			
47. Evaluate Results of All Analyses Performed			
48. Express Opinions/Assign Levels of Certainty (e.g. know levels per ASTM)			
49. Prepare Reports (verbal and written)			
50. Prepare for testimony (including exhibits)			
<b>I. Demonstrating Knowledge of Legal Procedures</b>			
51. Define Legal Terms (e.g. terms and concepts used by attorneys in discussing cases)			
52. Demonstrate Knowledge of Types of Legal Proceedings			
53. Recognize Legal Precedents (regarding document examination issues) (e.g. Daubert, Kumho)			

DECLARATION

I have placed a check-mark next to the subjects in which I have acquired training, prior to the filing of my application for BFDE testing.

Date \_\_\_\_\_

Signature \_\_\_\_\_