



ISASI

(INTERNATIONAL SOCIETY OF AIR SAFETY INVESTIGATORS)





ISASI WAS FOUNDED TO

- Promote air safety by the exchange of ideas, experiences, and information on aircraft accident/incident investigations and prevention.
- Promote technical advancement by providing professional aviation safety education through lectures, displays, and presentations
- Broaden professional relationships among its members
- Promote the prestige, standing and influence of Air Safety Investigators in matters of aviation safety





HISTORY OF ISASI

Founding Principles - The primary purpose of the Society was to promote that part of the aeronautical endeavor wherein lies the moral obligation of the Air Safety Investigator to the public, and to promote the education of its members, of those directly associated with aeronautical problems, and of the general public concerning those problems peculiar to the work of the Air Safety Investigator





ISASI SOCIETIES

- Asian
- Australia
- Canadian
- European
- Korean
- Latin America
- Middle East & North Africa
- New Zealand
- Pakistan
- Russian
- United States
- International





ADMINISTRATION OF ISASI

Executive Officers

Frank Del Gandio, President

Ron Schleede, Vice President

Chad Balentine, Secretary

Bob MacIntosh, Treasurer

Richard B. Stone, Executive Advisor

International Councilors

Asia-Civil Aviation of Hong Kong

Chong Chow Wah-AAIB-Singapore

Australia-Richard Sellers

Canadian-Barbara Dunn

European-Rob Carter

Korean-Jenny Yoo

Latin American-Daniel Barafani

Middle East & North Africa-

Khalid Al Raisi

New Zealand-Alister Buckingham

Pakistan-Syed Naseen Ahmed

Russia-Sergey Zayko

USA-Toby Carroll

International-Caj Frostell



ISASI WORKING GROUPS

- Air Traffic Services
- Airports
- Cabin Safety
- Corporate Affairs
- Critical Incident Stress Management
- Flight Recorders
- General Aviation
- Government Air Safety
- Human Factors
- ICAO
- Investigators Training & Education
- Military Air Safety
- Positions
- Unmanned Aircraft Systems
- ISASI Student Mentoring Program





ISASI MEMBERSHIP

ISASI has about 1294 Individual Members and about 125 Corporate Members representing over 73 countries

- Charter
- Life Member
- Fellow
- Honorary
- Full Member
- Associate Member
- Affiliate Member
- Student Member
- Corporate Member





ISASI SAFETY PROMOTION

The ISASI 2019 Organizing committee invites you to The Hague The Netherlands for the ISASI annual Seminar
1st – 6th September 2019.

<https://cvent.me/2R9V0>

<https://isasi2019.org>





ISASI SAFETY PROMOTION



ISASI 2019

ISASI is pleased to announce the ISASI 2019 seminar will be held in The Hague – The Netherlands from 2nd to 6th September, 2019.

Please go to www.isasi2019.org for all current information regarding the seminar. We look forward in seeing you in The Hague.

Future Safety: Has the past become irrelevant?

ISASI is pleased to announce that registration is now open for ISASI 2019. Please use the following link to go directly to the registration site at <https://cvent.me/2R9V0> or go to <https://isasi2019.org> for all up to date information on the seminar.





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INTERNATIONAL SOCIETY OF AIR SAFETY INVESTIGATORS

Park Center
107 East Holly Avenue, Suite 11
Sterling, VA 20164
Phone: (703) 430-9668
Fax: (703) 430-4970

Application for Individual Membership

ISASI No. _____
(Office use only) Rev. 18-05

I am applying for the following membership classification:

MEMBER [] ASSOCIATE MEMBER [] AFFILIATE MEMBER [] STUDENT MEMBER []

Please Print or Type (Include a business card if available)

Mr. [] Mrs. [] Ms. [] Dr. [] Other _____

Name: _____ Date of Birth _____
Last First Middle Initial Month Day Year

Address: _____

Address: _____

City: _____ State, District, Province: _____

Country: _____ Zip/Postal Code: _____

Home Phone: _____ Mobile/Cell: _____

Business Phone: _____

(If outside North America please include international country code).

Email: _____

Website: (Only if you want it listed) _____

Employment Record (Please list last two employers)

Present Employer's Name: _____

Address: _____

Job Title: _____

Employed From: _____ To: _____
Month Day Year Month Day Year

Does your position involve aircraft accident investigations or prevention activities? YES [] NO []

Previous Employer's Name: _____

Address: _____

Job Title: _____

Employed From: _____ To: _____
Month Day Year Month Day Year

Did your position involve aircraft accident investigations or prevention activities? YES [] NO []

Accident Investigation/Prevention Experience

Your class of membership in ISASI is dependent on your aviation investigation experience and/or your aviation related safety management and accident prevention experience. Your qualifications and education standards will also be taken into account when reviewing your application for membership. Please fill out the sections below as completely as possible. (Add additional information on additional pages if necessary).



**INTERNATIONAL SOCIETY OF
AIR SAFETY INVESTIGATORS**

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Phone: (703) 430-9668
Fax: (703) 430-4970

List your qualifications and experience below. [Please use additional pages as necessary and include a copy of your CV if you have one.]

Qualification: _____

Education/Degrees: _____

Experience: _____

Provide details of your investigation and/or aviation related safety management and accident prevention experience: _____

To be eligible for Full membership you must have at least three (3) years of experience in an aviation safety position involving aircraft accident investigation and/or aviation related safety management and accident prevention experience. Aircraft accident litigation is not considered to be qualifying experience for this classification membership. An affidavit signed by a military applicant's supervisor will be considered when the investigations or experience may be classified.

If an applicant does not have access to ISASI members for a referral signature, any member can send an email endorsement to the ISASI office. If this is not possible, a resume must be submitted with the application.

Member Referrals (For Full or Associate membership, two signatures from current members are required.)

Recommended by:

PrintName: _____ MemberNo: _____
Last First Middle Initial

Signature: _____ Date: _____
Month Day Year

Print Name : _____ Member No: _____
Last First Middle Initial

Signature: _____ Date: _____
Month Day Year

If applying for Student membership, please include the following:

Name of Institution: _____

Name of Professor: _____ Signature of Professor: _____

I, the undersigned, certify that the information contained in this application and any attached documentation is correct. I understand that any information that misrepresents my qualifications is grounds for rejection of the application and for subsequent revocation of membership. I agree that if accepted for membership, I will comply with the Bylaws and Code of Ethics of the International Society of Air safety Investigators (ISASI). Further, I agree that if for any cause my membership in ISASI is terminated, my rights, title and interest in or to ISASI shall cease. I understand that the Membership Committee authorised by ISASI will determine the classification of membership for which I am eligible, based on the information I submit. Information provided on this application is confidential and will not be released outside ISASI without permission.

Signature is required to complete the membership process.

Print Name: _____
Last First Middle Initial

Signature: _____ Date: _____
Month Day Year





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**Please include check payable to ISASI in US currency
as follows or complete the credit card information below:**

Member, Associate or Affiliate Membership: \$125 (Includes annual dues of \$80 and one-time application processing fee of \$45).

Student Membership: \$45 (Includes annual dues of \$25 and one-time application processing fee of \$20).

Please charge my:    Annual Auto-Renewal

Card Number: _____ Expiration Date: _____
Month Year

Card Holder: _____ Security Code: _____

Required Signature: _____

* Credit card must be valid in the U.S.

By clicking agree, I confirm that the information shown above is correct and that I am providing my signature as authorization for payment.

**Optional:
Attach Business Card/
Copy of Business Card Here**

**Forum, our official magazine, is available in
hard copy or digital format.**

Please indicate your choice:

Hardcopy Digital

Please do not write below this line. For ISASI use only.

National Society

Action: _____
Signed: _____
Date: _____
Month Day Year

Member Committee-International Council

Action: _____
Signed: _____
Date: _____
Month Day Year

Date Paid: ___ / ___ / ___ By: _____ Amount: \$ _____
Website Password: _____