



# Indiana Genealogical Society

P.O. Box 10507

Fort Wayne, IN 46852-0507

<http://www.indgensoc.org>

## Indiana County Genealogist Application Form

**\*\*All application materials should be sent via postal mail to the Program Coordinator: Marlene Polster, 1437 W. 97th Ave., Crown Point, IN 46307.\*\*** If you have any questions, you may contact her - phone (219) 776-4997; e-mail [lakecogen@sbcglobal.net](mailto:lakecogen@sbcglobal.net)

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

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

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

County of desired ICG appointment: \_\_\_\_\_

Describe your genealogy background and experience (including any positions held, materials published, etc.)--we are especially interested in learning about your familiarity with the county you are applying to represent. **Note:** You may include this on a separate sheet of paper if desired.

**Letters of Recommendation:**

a) Two letters of recommendation from different genealogical/historical organizations, libraries, or genealogical research facilities in the county. The letters must be on the official letterhead of the organization and be signed by a(n) individual(s) authorized to speak for that organization.

**OR**

b) Six separate letters of recommendation from verifiably qualified individuals (e.g. authors, publishers, researchers, librarians, archivists, etc.). These individuals must be from six different entities. One letter of recommendation from a genealogical/historical organization (as outlined above) must also be included.

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Name/Organization: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

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

By signing the above, the applicant grants permission to the Indiana Genealogical Society to publish the applicant's contact information in IGS publications and to use information from their application in various publicity outlets.

**FOR IGS USE ONLY:**

<b>DATE RECEIVED:</b>	
<b>DATE OF BOARD/EXECUTIVE COMMITTEE DECISION:</b>	
<b>TERM EXPIRES:</b>	