



Fundamentals of Insurance

Home Study Application

STUDENT INFORMATION

Student Name: _____
Last Name *First Name*

Email Address: _____

Brokerage Employer: _____

Mailing Address: _____

City / Town: _____ Prov: _____ Postal Code: _____

Phone: _____ Fax: _____ Year of Birth: _____

INDUSTRY INFORMATION

Number of Years in Insurance Industry: _____

This is to confirm that I, _____, understand and agree to the following terms and conditions as a registrant:
(PRINT NAME)

- An exam must be taken within six (6) months of the registration date or a \$125.00 fee applies to write the exam.** Please mark your calendar accordingly, as you will NOT receive a reminder.
- The pass mark is 70%. Any rewrites (maximum three writes within six months) are \$125.00 payable in advance. **Your fees are non-refundable if you are unable to attend an exam.**
- Exams must be applied for in advance and are available by **prior arrangement** only. Exams are held promptly at 9:00am to 12:00pm (latecomers will not be admitted) on generally the second Monday of each month in Winnipeg. (Outside of Winnipeg by arrangement.) Photo ID may be requested at the exam write.
- The exam may be attempted a maximum of three times in one 6-month period to qualify for a Level 1 General Insurance License.
- EXAM RESULTS will be sent ICS or Canada Post within one (1) week of the exam date and will be available on the IBAM website: www.ibam.mb.ca.

Purchase of Supplemental Study Guide (additional cost of \$60)

Student Signature: _____ **Date:** _____

PAYMENT INFORMATION

Course Fee of \$325.00 (\$385.00 with the purchase of Study Guide) payable by Visa, Mastercard or Company Cheque

Visa / Mastercard #: _____ Expiry Date: _____

Mail: 600-1445 Portage Ave, Winnipeg, Manitoba R3G 3P4

Send completed applications and payment to:
Fees include a non-refundable charge of \$40.00

Email: Christine@ibam.mb.ca
Fax: 204-489-0316

FOR OFFICE USE ONLY

Acc: ___ Ack: ___ Text: Loomis / Mail / Pickup / Other: _____ Ship Date: _____ By: _____