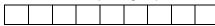
2021 Computer Registration Form

To register for an exam, please complete both sides of this form and return it to The Institutes as soon as possible. Either credit card information or the necessary fees (U.S. currency only) must accompany this Registration Form. Do not use this form to register for AAI segmented examinations offered through state associations. For more information, contact your state association.



Telephone: (800) 644-2101 or (610) 644-2100 Fax: (610) 640-9576 Email: CustomerSuccess@TheInstitutes.org Web: TheInstitutes.org

1. Student ID number (if assigned)



To have a student identification number assigned to you, please call Customer Success at (800) 644-2101.

Cautions about requesting new ID numbers:

- The Request a New ID function is not available to employees of some companies. Check with your employer before requesting a new ID number.
- Changing to a new ID number may delay employer reimbursement or incentive payments. Check with your employer before requesting a new ID number.
- Creating a new ID number may result in exam grades being improperly recorded in your different records. Always check your grades after changing your ID number.
- 2. PRINT your full name exactly as shown on the photo ID you will present at the testing center. Your name must match, or you will be denied admission to the testing center.

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	Year entered the insurance business:														
	Highest degree earned: (Check one)														
	1 🗌 High school or GED 5 🔲 Law														
	2 🗌 Associate						6 🗌 Doctorate								
	3 🗌 Bachelor						7 🗌 None of the above								
	4 🗆] Ma	ster												
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	Day	time	pho	one	num	ber:									
	Ema	il ac	ddre	ss:_											
	Check here if you would like to receive email updates														

10. Job level: (Check one)

- 1
 Executive or Senior Management
- 2 Middle or General Management
- 3 🗌 First-Line or Supervisory Management
- 4 Senior Level Professional (non-management)
- 5 Mid-level Professional (non-management)
- 6 Entry Level (non-management)
- 7 🗌 Other

11. Principal job function: (Check one)

- 1 🗌 Actuarial
- 2 Agent/Broker/Producer
- 3 🗌 Analyst
- 4 🗌 Claims
- 5 🗌 Customer Service
- 6 G Finance/Accounting
- 7 HR/Training & Development
- 8 Information Systems/Technology
- 9 Legal/Compliance
- 10 🗌 Reinsurance
- 11 🗌 Risk Management
- 12 Sales & Marketing
- 13 🗌 Underwriting
- 14 🗌 Other
- 12. Employer's name: Illinois State University
- 13. Branch office city/state (if applicable)
 - City: Normal State: IL
- 14. Employer organization type: (Check one)
 - 1 🗌 Insurance company
 - 2 🗌 Reinsurance company
 - 3 🗌 Agency
 - 4 🗌 Adjusting firm
 - 5 🗌 Brokerage firm
 - 6 Third-party administrator (TPA)
 - 7 Government/public entity
 - 8 Risk management in a noninsurance organization
 - 9 Professional/trade/education organization
 - 10
 Other insurance services: _
 - 11 Other financial services:

Print your name:

15.	Preferred mailing address:	Home Home	Business	
	Address			

Address

City/State/Zip

Province/Country

16. First-time registrants only—how did you hear about The Institutes? (Check one)

1 🗌 Employer HR, education, or training

- 2 🗌 Manager or supervisor
- 3 Co-worker or business colleague
- 4 Advertisement in industry publication
- 5
 Professional association
- 6 🗌 Web search
- 7 Conference or trade show
- 8 🗌 Other: __

17. What diploma/certificate are you working toward? (Check one)

		🗌 ASLI
🗆 AAI-M		🗌 AU-M
	🗌 ANFI	🗌 RMI
		SM
		Cyber
AIC-M		
	🗌 ARe	

 Your exam registration—Indicate initials for the exam and its number (e.g., AIC 40, AIM 40) and the segment, if appropriate (AINS 21 A, ARM 401 B). Then, indicate the testing window.

Exam No.	Testing Window (e.g., Oct 15 - Dec 15, 2021)

19. Preparation method: (Check one)

1 Group learning with a course leader

2 Group learning without a course leader

- 3 Independent learning
- 4 🗌 Relying solely on experience and knowledge
- 5 🗌 Relying on non-Institutes study materials
- 6 Institutes Online Learning
- 7 🗌 Other Online Classes

Student ID number:

20. Testing location: (Check one)

Prometric Testing Centers worldwide

Institutes-Approved On-site testing centers worldwide

On-site Center Code Number: ____ WIL 85

Virtual Exam

21. CE Credit (Check applicable license):

Producer	Adjuster	None	
License/NPN #			
Resident State			
License Expiratio	on Date		

22. The Institutes Privacy Statement

The Institutes respect students' privacy rights and are committed to safeguarding each student's personal information. Please see The Institutes Privacy Statement on The Institutes' website, TheInstitutes.org/privacy.

23. Ethics

A CPCU candidate is bound by the CPCU Code of Professional Conduct. CPCUs along with all other persons taking Institutes exams are subject to The Institutes' Code of Academic and Professional Integrity. The CPCU Code is available at TheInstitutes.org.

The Code of Professional and Academic Integrity is found at TheInstitutes.org/CAPI.

24. Payment: (See page 11 for Exam Fee Chart)

Exam Fee	\$
Credit Available	-\$
Total Remittance	\$

If paying by check, please make payable to The Institutes.

For corporate invoicing, provide the billable account code. Account Code: _____

Return this form with fee or payment information to:

The Institutes 720 Providence Road, Suite 100 Malvern, PA 19355-3433 Fax: (610) 640-9576

Credit Card number:

(American Express, Diners Club, Discover, MasterCard, and VISA cards are accepted.)

CSV:

_ Amount_

Expiration date: _____

Billing address zip code: _____

Signature: ___

For accounting use only

Date Received_____

Account #____