

## BIG "I" MIDWEST ELITE FORCE SALES TRAINING 2018-2019 Application

Please fully complete this application and attach the following documents:

- A brief resume, and
- A letter of commitment from the student and an agency principal. (Find a copy on our website: www.iian.org)
- Include in the letter the reason(s) you want to be a part of this program.

**Total tuition** of \$2,200 for members of a state association which is a member of IIABA includes: **Non-member tuition:** \$3,700.

- 12 full days of instruction, presented 3 days at a time, quarterly
- All class workbooks, supplies, reading materials, morning coffee and afternoon refreshments, and 2 lunches;
- Monthly mentoring by experienced IIAN sales staff, individualized student profiles, after-class activities planned to facilitate relationship building among students
- The Associate in Insurance Production (AIP) diploma\*\* and conferment in October, 2019 during IIAN Annual Convention (\*\*attendance at all class sessions and completion of classroom work and written reporting requirements required)

Hotel accommodations: Current rates and information will be emailed to you upon receiving your application

Registration deadline is <u>April 2, 2018</u> – applicants will be considered on a first-come, first-served basis. No registration is confirmed until completed application, required attachments, and financial payment has been received. All information is deemed private and confidential in and out of class.

Student Information:			
Name:		Big "I" Member? _	_YesNo
# of years in insurance:	_ # of years in sales:		
Other sales training courses taken Course name(s): Date(s) taken:	:		
Agency Information:			
Agency:	# of agency locations (main/branches)		
# employees in all locations: Approx. amount of <u>agency</u> premium:			
Address:	City:	State:	Zip:
Phone: E-mail Address:			
Name of Agency Mentor/Manager:			
Mentor's e-mail address:			
x			
<b>RETURN YOUR APPLICATION AN</b> more information call (402)476-2951			
Credit Card Type: American	ExpressVisa MasterC	ard	
Name on Credit Card:		Expiration Date:	
Card Number:		CVV code on back:	
Billing Address:	City:	State Zi	p: