2024 Oregon Scholarship

Deadline May 1, 2024

☐ CIC *Please select Scholarship Choice* ☐ CISR

The PIA of Oregon Annual CIC & CISR Scholarship programs are part of our continuing education commitment to career-minded insurance professionals needing assistance to begin their CIC or CISR education. It is our belief that true professionals never stop learning and that the best insurance professionals make a career commitment to their own growth.

The PIA in conjunction with The National Alliance, grants five scholarships for each program every year. The scholarships cover the registration fee for a single CIC or CISR course of their choice in Oregon from May 1, 2024 to May1, 2025

The selection of the scholarship recipient is made by the CIC/CISR Advisory Committee on the basis of the following information:

- The nominee must be a full-time insurance professional.
- The nominee should demonstrate an interest in and commitment to professional continuing education.

Scholarships may not be used for designation updates or for CE purposes only. Recipients must plan on taking the exam and continuing through the program.

NOTE: Individuals wanting scholarships may apply for themselves. You do not need an outside party to be nominated. Please fax completed form to PIA at 360-571-7600 or email Mykal Bourn mykalbourn@piawest.com

PIA Western Alliance
3205 NE 78th Street Ste 104
Vancouver, WA 98665
888-246-4466
Correspondence Address

Contact Data:

Please Print

Full Name _____

Agency/Company _____

Co. Address_____

City/State/Zip _____

E-Mail address _____

Telephone ( )_____

Fax ( )_____

What professional organization (s) does this individual belong to? (PIA, IIA, NAIW, etc.)_____

What professional designations does this individual hold? _____

_____

Will this individual continue toward the CIC/CISR designation? ☐ Yes ☐ No

Will this be the first **CIC** program this individual has attended? ☐ Yes ☐ No

Will this be the first **CISR** program this individual has attended? ☐ Yes ☐ No

Are there economic concerns that will prohibit this person from taking the course? ☐ Yes ☐ No

Briefly Describe:

Briefly describe why you believe that you or this individual should be considered for a scholarship.

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Nominator: _____

Agency/Co.: _____

Phone: _____

Email address: _____