2026 Oregon Scholarship

Deadline May 1, 2026

☐ CIC *Please select Scholarship Choice* ☐ CISR

The **PIA of Oregon Annual CIC & CISR Scholarship Programs** are designed to help career-focused insurance professionals take the first step toward earning their CIC or CISR designation.

We believe that true professionals never stop learning—and the best in our industry commit to their own growth.

In partnership with **The National Alliance**, PIA awards **one scholarship for each program every year**. Each scholarship covers the **registration fee for one CIC or CISR course of your choice in Oregon**, valid from **May 1, 2026, through December 31, 2026**.

Eligibility Requirements:

- 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
4400 NE 77th Avenue, Ste 330
Vancouver, WA 98682
888-346-4466
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.

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Nominator: _____

Agency/Co.: _____

Phone: _____

Email address: _____