

CALIFORNIA COUNCIL ROOKIE OF THE YEAR APPLICATION

CANDIDATE INFORMATION

Name _____

Mailing Address _____

Email _____ Phone _____

Local Association _____ Region _____

☐ Member at Large

Year Joined IAIP _____ Year Entered Insurance Industry _____

SECTION 1

IAIP INVOLVEMENT

Include only those activities that occurred during the **24-month period** from the date (month/year) of joining IAIP. *(If needed, expand the tables or attach additional sheets with the details)*

IAIP Offices & Committees

List each elected office, committee chair and committee membership position held with dates of services. Specify local, council, regional or international level.

Level	Position	Committee	Dates of Service
Local/Council/Regional/International	Officer/Chair/Member		

IAIP Conferences & Conventions

List the regional meetings and international conventions attended during the **24-month period** from the date (month/year) of joining.

--

SECTION 2

EDUCATION

List the following education achievements that occurred during the **24-month period** from the date (month/year) of joining IAIP. *(If needed, expand the tables or attach additional sheets with the details)*

IAIP Education

List specific titles and dates of any IAIP course that you have completed.

Title of Program	Date(s)

Industry Education

List program name, date, duration and sponsoring organization of each insurance and/or field-specific education program (of at least two hours length) that you have attended.

Title of Program	Date(s)	Length of Course	Sponsoring Organization

Degrees & Designations

List any degrees or designations that you have earned or working towards earning. There is no time restriction so **list all that apply**.

Degree or Designation	Date Earned or Anticipated Completion Date	Institution/Sponsoring Organization

SECTION 3

COMMUNITY SERVICE/OTHER ACHIEVEMENTS

List any other activities, achievements, or associations you have participated in that you feel reflect your dedication to IAIP and the insurance industry.

--

SECTION 4

EMPLOYMENT HISTORY – LAST FIVE YEARS

Indicate insurance employment (list most recent first). *(If needed, expand the table or attach additional sheets with employment details)*

Dates of Employment	Employer	Position(s) Held

SECTION 5

ESSAY

In the space below, prepare an essay up to 500 words that includes the following:

- a brief description of your job including responsibilities
- professional accomplishments and your future career goals
- a description of how your membership, participation, and involvement in IAIP has helped you since joining
- contributions you have made to your local association, if applicable

I certify that the above statements are true and are made in full compliance with the IAIP Code of Ethics.

Signature of Candidate

Date