Self-Inventory for Prospective CPCU and IIA Students

Name ___ Ms. ___ Mr. _____ Date _____

Agency/Co./Firm _____ Date of Birth _____

Street/P.O. Box _____ Social Security No. _____

City/State/Zip _____ Job Title _____

Above address is my ___ Business Address ___ Home Address Daytime Phone ( ) _____

This Self-Inventory form is a tool to help you plan your CPCU and/or IIA study. The information you give will provide the basis for an appropriate course recommendation that will help you work toward your educational and professional goals. This recommendation will consider your insurance experience, formal study in CPCU or IIA subject areas, general educational background, motivation level, study habits, and attitudes.

I am interested in study of the following areas:

___ Intro. to P & L Ins.
___ Intro. to Claims
___ Intro. to Risk Management
___ Intro. to Underwriting
___ Supervisory Mgmt.
___ Total Quality Mgmt. (DIS/AIS)
___ Global Insurance
___ Insurance Regulation
___ Public Entity Risk Mgmt.
___ Business Writing
___ CPCU
___ General Insurance
___ Claims
___ Management
___ Information Technology
___ Personal Lines
___ Risk Management
___ Com'l Lines Underwriting
___ Insurance Production
___ Premium Auditing
___ Ins. Acctg. & Finance
___ Marine Ins. Mgmt.
___ Reinsurance
___ Fidelity & Surety Bonding
___ Surplus Lines Ins.
___ UNDECIDED

Section A—Insurance Experience

1. I have worked in property-liability insurance OR have worked in a job related to insurance for
   ___ 1 year or less ___ 3 to 4 years ___ 8 or more years
   ___ 1 to 2 years ___ 5 to 8 years ___ Not Applicable

2. The **state**-issued licenses I **now** hold are
   ___ Adjuster ___ Broker
   ___ Agent (property and/or liability) ___ Counselor
   ___ Agent (life and/or health) ___ Solicitor
   ___ NONE

3. The firm I presently work for is
   ___ an adjusting firm
   ___ an insurance/reinsurance co.
   ___ a risk mgmt./loss control svcs. firm
   ___ an agency/brokerage
   ___ an ins. periodical/rating bureau/state ins. dept./trade assn.
   ___ Other (Specify)
   _____

4. My job duties are mostly related to:
   ___ Claims/Legal
   ___ Underwriting
   ___ Sales/Marketing/Account Production
   ___ Risk Management/Loss Control
   ___ Accounting & Finance
   ___ Premium Auditing
   ___ Actuarial
   ___ Research & Planning
   ___ Computer/Info. Processing/Office Services
   ___ Human Resources/Education & Training
   ___ Other (Specify)
   _____
   _____

5. The **percentage** of my insurance-related work time is spent in one or more of the following areas: (EX: 40% in personal property & 60% in commercial property = 100% of my insurance-related work time.)
   ___ personal property
   ___ personal liability
   ___ personal property-liability
   ___ commercial property
   ___ commercial liability
   ___ commercial property-liability
   ___ life and/or health
   ___ risk mgmt./loss control services
   ___ property-liability insurance related, such as acctg. & finance, computer/info. processing/office services
   ___ insurance specialty areas
      ___ fidelity & surety bonding
      ___ marine ins.—inland/ocean
      ___ reinsurance
      ___ surplus lines
   ___ NONE of my work duties are in insurance or insurance-related areas

6. My present job is best described as:
   (If the selection you **checked** includes several job titles, please **circle** the one job title that best describes your job duties.)
   ___ Manager/Asst. Manager/ Supervisor for Agency/Co./ Branch/Office
   ___ Manager/Asst. Manager/ Supervisor of Claims/Risk Mgmt./Sales/Underwriting
   ___ Accountant/Bookkeeper
   ___ Account Executive/ Producer/Agent/Broker/ Solicitor/Sales Rep. for Direct Writing Co.
   ___ Account Svc. Rep./ Customer Svc. Rep./Policy Examiner
   ___ Actuary
   ___ Attorney—Claims/Co. legal dept.
   ___ Other (Specify)
   ___ Claims Examiner/Claims Rep./Adjuster/Agency Claims Clerk/Claims Admin. for Self-Insurer
   ___ Clerical Support Staff
   ___ Educ. Dept. Dir./Teacher/ Personnel Dept./Admin./ Human Resources Dept.
   ___ EDP Programmer/Operator/ Info. Systems support staff
   ___ Loss Control—property/ casualty
   ___ Premium Auditor/Internal Auditor
   ___ Special Agent/Field Rep.
   ___ Technical Support Staff
   ___ Underwriter
   _____
   _____

Section B—General Education

7. The highest level of formal education I have completed is:
   ___ Grade school ___ High school or equivalent
   ___ College. The number of years I have attended college. (**circle one**)
   1 2 3 4 5 6 7 or more

8. The highest educational diploma or degree I now hold is:
   ___ High school diploma ___ Law degree
   ___ H.S. equivalency via GED ___ Master's degree
   ___ Associate degree ___ Doctoral degree
   ___ Bachelor's degree ___ NONE

9. My college major was _____

10. College/University I attended was _____
    _____
    The year I graduated or last attended college was _____

11. I last attended school as a full-time student **or** completed a college course, job-related course, a course to prepare for an IIA, CPCU, CLU, CPA, or similar exam (Please record course work in Section C.)
    ___ 2 years ago or less ___ 10 years ago or more
    ___ 2 to 4 years ago ___ NOT APPLICABLE
    ___ 5 to 10 years ago

12. I have taken a national exam for a CPCU or IIA course or similar designation program (List in Section C)
    ___ 2 years ago or less ___ 10 years ago or more
    ___ 2 to 4 years ago ___ NOT APPLICABLE
    ___ 5 to 10 years ago

Section C—Prior Course Work in CPCU/IIA Subject Areas

The insurance or work-related courses I have completed are:

13. **CPCU/IIA courses or programs** **Year Completed**

Other Insurance or Industry-Related Study

Type of Course	# of Weeks or Assignments	Year Completed
14. Correspondence		
a.		
b.		
15. Company/Assn. Group		
a.		
b.		
16. FCII/ACII, FCAS/ACAS, etc.		
a.		
b.		
17. CLU, FLMI, HIAA, LUTC, etc.		
a.		
b.		
18. College/Night-school courses not listed in Section B		
a.		
b.		

Section D—Study Habits and Attitudes

19. On a scale of 1 to 10, my motivation (my inner drive and determination) for personal growth and professional development is a (1 = lowest and 10 = highest)
    1 2 3 4 5 6 7 8 9 10

20. I plan to study my CPCU/IIA course via:
    ___ a formal class ___ independent study
    ___ a study group ___ not certain

21. I am willing and able to spend _____ hours per week in personal study and preparation.

22. I plan to study a CPCU or IIA course
    ___ and will definitely take the national examination
    ___ and am undecided about taking the national examination
    ___ and will definitely not take the national examination

23. On a scale of 1 to 5, I believe my reading speed and comprehension of college-level text materials is:
    1 2 3 4 5
    poor good

24. The factors listed below have varying degrees of importance in determining the success of students in CPCU or IIA study.
    Rank these factors in order of importance to you.
    (#1 = **most** important factor to you.
    #5 = **least** important factor to you.)
    ___ the amount of knowledge or work experience I have when I begin the course
    ___ the amount of effort I apply to personal study and preparation
    ___ the amount of practice I have in answering exam questions
    ___ the course leader's effectiveness as a discussion leader (if in a study group)
    ___ the course leader's effectiveness as a lecturer (if in a class or study group)
    ___ Other (Specify)
    _____
    _____

Additional Information

I have purchased my study materials. ___ YES ___ NO

I have started my study. ___ YES ___ NO

I plan to begin my study in Month _____ Year _____

I plan to take my exam in Month _____ Year _____

The CPCU/IIA program/course I am starting is

_____

___ I would like a local sponsor to give me educational counsel, support, and encouragement, if one is available in my area.

For other information you want to add, please attach a note.

For an objective review of your Self-Inventory responses and a program/course recommendation that might provide your best educational starting point, send your Self-Inventory form to:

American Institute for CPCU
Educational Counseling
720 Providence Road
P.O. Box 3016
Malvern, PA 19355-0716