

MEMBER ACHIEVEMENT RECORD

MEMBER INFORMATION

Name Member ID			
Designations			
Mailing Address			
Email	1		
Company	Work Phone		
Local Association	Region		
Year Joined IAIP	Year Entered Insurance Industry		
International Involvement List the dates and office for each elected office that you have held at the international level. Also list the dates for the following: O Committees, task forces or focus groups that you chaired O memberships on international committees, task forces or focus groups O memberships on international convention committees			
List the number of international con	ventions you have attended in the past 10 years.		
List dates for any international CWC	speak-off in which you participated. Indicate if you won.		
List the dates and names of any awa international level and have not liste	rds of merit or special recognition that you have won at the ed elsewhere.		

Regional Involvement
List dates that you served as regional vice president, chaired committees, served on any other regional
committee (include position held), or served on a regional conference committee (include position held).
List the number of regional conferences you have attended in the past 10 years.
List dates for any of the following regional events in which you participated. Indicate if you won.
 CWC speak-offs
 Insurance Professional of the Year, Claims, Client Service, Professional Underwriter, Risk
Management, Rookie, or Young New Professional Awards
Council Involvement
List dates for any time that you have served as council director or director-elect, chaired a position
(appointed or elected), or served on any other council committee or position.
(appointed of elected), of served on any other countries committee of positions
List the number of meetings that your council has held in the last ten years and how many of them that you
attended.
List the dates of any awards of merit or special recognition that you received from your council.
List dates for any council CWC speak-off in which you participated. Indicate if you won.
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List each elected office, committee chair	and committee member	ership position with	dates of services.
List the percentage of local association n	meetings that you attend	d on annual basis.	
List the dates of any awards of merit or s	special recognition that	you received from	your local association.
List dates for any local CWC speak-off in	which you participated	. Indicate if you wor	1.
IAID O Inverse Fac			
IAIP & INDUSTRY EDU	JCATION		
List specific titles and dates of any IAIP co	ourse that you have com	pleted.	
Title of Program			Date(s)
Industry Education List specific titles, dates and sponsoring of have attended.	organization of each insu	rance-related works	hop or seminar that you
List specific titles, dates and sponsoring o	organization of each insu	rance-related works Sponsoring Org	
List specific titles, dates and sponsoring o have attended.			
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Industry Instruction

List specific titles, dates, length of course and sponsoring organizations (including IAIP) of each insurance-related workshop, seminar or course that you have taught (not on-the-job).

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

Degrees & Designations

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

List any degrees of designations that you have earn	eu. mere is no ti	me restriction so list all that apply.
Degree or Designation	Date Earned	Institution/Sponsoring Organization
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INDUSTRY INVOLVEMENT		

INDUSTRY INVOLVEMENT
List specific titles and dates of each activity that involved speaking to a related industry or consumer group on insurance or IAIP (not job related).
List involvement in other industry associations including committees served on or chaired and offices held with dates of service.
List meeting names and dates for each non-IAIP industry association meeting that you attended.
List awards, dates, and sponsoring associations for each award of merit or special recognition that you received from an industry organization or other industry body.
List any participation that you have had in the Insurance Scholarship Foundation of America.

EMPLOYMENT HISTORY

Dates of Employment	Employer	Position(s) Held

ADDITIONAL NOTES					