

NEW HAMPSHIRE CONTINUING EDUCATION COURSE APPLICATION

Please clearly print or type information on this form. Thank you for helping us promptly process your application.

CEAI

Provider Information

| | | | |
|-----------------|----------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Provider Name | | NH Provider ID | |
| Contact Person | E-mail Address of Contact Person | | Is Provider an Insurer? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Phone Number | Website Address | Previously submitted course ? <input type="checkbox"/> Yes COURSE ID _____ <input type="checkbox"/> No | Accredited to another Provider? <input type="checkbox"/> Y <input type="checkbox"/> N If Yes, Provider Name _____ _____ |
| Mailing Address | | City | State Zip Code |

Course Information

| Course Title | | Is this course open to Public? <input type="checkbox"/> Yes <input type="checkbox"/> No If you check NO, course approval will not be displayed on publicly viewable approved course list |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Course Objective/Major course topics | | |
| Method of Instruction | | *National Course* |
| Self-study <input type="checkbox"/> Correspondence <input type="checkbox"/> On-line Training (self study) <input type="checkbox"/> Video/Audio/CD/DVD <input type="checkbox"/> Word Count _____ <input type="checkbox"/> Difficulty (Circle) Basic Intermediate Advanced | Classroom <input type="checkbox"/> Seminar/Workshop <input type="checkbox"/> On-line Training (facilitated) <input type="checkbox"/> Teleconference <input type="checkbox"/> Other _____ | National Insurance Designation? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Type: _____ Course offered by Higher Education Institution? <input type="checkbox"/> Yes <input type="checkbox"/> No How will attendance & successful completion be evaluated? _____ _____ _____ |
| Examination Required? <input type="checkbox"/> Yes <input type="checkbox"/> No How will student be evaluated _____ _____ _____ | | |

Credit Hours Requested and Course/Hours Decision

| Course Concentration | Hrs. Requested by Provider | Hrs Approved by Reciprocal states | | Hrs. Approved by NH |
|-----------------------------------------------|----------------------------|-----------------------------------|-------|---------------------|
| | | State | Hours | |
| A. Producer Topics: | | | | |
| General Insurance Principles (All Lines) | | | | |
| Ethics | | | | |
| FEMA Flood | | | | |
| Total Hours | | | | |
| B. Multiline Adjuster : Total Hours | | | | |
| C. Workers' Comp adjuster: Total Hrs | | | | |
| D. Public Adjuster : Total Hours | | | | |

| | | |
|----------------------------------------------------------------|--------|--------|
| <i>-----Information Below is for State of NH Use Only-----</i> | Check# | Amt pd |
| Approval/Disapproval date | | |
| Course number assigned (if course is approved) | | |
| Course approval expiration date (if course is approved) | | |

DISAPPROVAL REASON:

Instruction Sheet

NOTE: This course may **NOT** be advertised or offered in the state to which application has been made until approval has been received from the NH Insurance Department.
Credits will only be awarded for courses whose subject matter will increase technical knowledge of insurance principles, coverages, laws or regulations and will not be awarded for topics such as personal improvement, motivation, time management, supportive office skills or other matters not related to technical insurance knowledge. No credit is awarded for sales and/or marketing courses .

New Providers must also attach the Continuing Education Provider Contact Form to their course application.

Complete the Course application

Submit the application form along with required course materials, a detailed timed course outline, and the required course application fee.

Programs which include **multiple days** require a separate application and fee for each day. Otherwise a student that does not attend all sessions is not entitled to any credit.

* Non-refundable course application fee is \$25.00 per line of authority, Checks are payable to the NH Insurance Dept

Forms that are incomplete or contain inaccurate information will delay review.

Courses should be submitted to the Department at least 45 days before the date the class is scheduled to begin.

The decision on approval of course application will be issued within 30 days of receipt of a completed application

Courses are approved for approximately 2 years and the expiration will be noted on the approval notice.

Providers are responsible for submitting course rosters for their students and should be completed within 15 days.

Providers will submit roster using the State Based System internet banking procedure. The processing fee is \$1.00 per credit.

For technical support , contact SBSHelp@naic.org 816-783-8450

Providers may contact Joan LaCourse at 603-271-0203 ext 209 or at joan.lacourse@ins.nh.gov

Cheryl Gagnon at 603-271-0203 ext 259 or cheryl.gagnon@ins.nh.gov

NH Continuing Education is regulated by RSA 402B, 402D and 402J, 281-a:63 and Administrative Rule 1300.

***National Course** is defined as an approved program of instruction in insurance related topics including a course leading to a national professional designation or an insurance course at an institution offered as part of a degree-conferring curriculum, presented by an approved CE Provider Organization.

* fee change effective 10/19/07

Mail to

***NH Insurance Dept.
Continuing Education
21 So.Fruit St Ste 14
Concord NH 03301***