

## **REQUEST FOR COURSE AND CREDIT APPROVAL** FOR INSURANCE CONTINUING EDUCATION

(WA CE Course App 1-2017)

Course Title: (Max 50 characters)	
Total Credit Hours Requested:       Ethics Hours Requested       (If applicable)	
Provider Number: Provider Name: Submitter Name: Telephone No.:	Email or fax the application and documents to: Email Address: InsEdu@oic.wa.gov or Fax: (360) 586-2019 Do not advertise this course until approved nor offer this
Email: Date Submitted:	course for credit until the effective date. If approved, the course effective date is <b>20 days</b> after the application is received by the OIC. WAC 284-17-278
LIVE CLASSROOM or LIVE WEBINAR	SELF STUDY (On-line or Correspondence)
<b>Classroom</b> - Attendance is monitored.	<b>Self Study</b> - Examination is required.
OR	Course includes video content.
Webinar - Attendance is monitored. Course is open to all Washington producers? Yes No If the course is available in Washington, submit a 10 Day Notice by email each time the course is presented.	Course is open to all Washington producers? YesNo Total Word Count? Ethics Word Count? (If applicable) Basic/ Intermediate/ Advanced level. Definition: WAC 284-17-286 Web Site Address for course, if an on-line course:
Washington insurance continuing education procedures can be reviewed on the commissioner's website at: <u>http://www.insurance.wa.gov</u> Go to the <b>"For Producers"</b> tab and select <b>"Provide Education".</b>	
INCLUDE ALL NECESSARY DOCUMENTS FOR COURSE APPROVAL. WAC 284-17-278	

Maintain course records for at least three years.