

Licensing Examination Application Form

Name of applicant _____

LAST NAME

FIRST NAME

MIDDLE NAME

Preferred Name _____

Birth Date _____

Home Address _____

ADDRESS

CITY/TOWN

POSTAL CODE

Resident Phone _____

Business Phone _____

Cell _____

Email _____

Failure to accurately disclose the following information may result in the nullification of your exam results:

1. Are you a permanent resident or citizen of Canada?

Yes

No

2. Are you a resident of Saskatchewan?

Yes

No

3. In the past twelve months, have you attempted any licensing exam(s) in any other province?

Yes

No

4. Are you currently licensed, or have you ever held a license, in any other province or state?

Yes

No

(If you answered "Yes," please provide full details on a separate sheet of paper.)

Please Indicate the Exam(s) You Wish to Write.

Property & Casualty (All Classes other than Life)

Exams are written at IBAS

Restricted Auto

Exams are written at IBAS

Property & Casualty Adjuster Representative

___ General Insurance Council Bylaw (open book) \$55

Crop Hail Agent (Insurance)

____ Crop Hail Agent Qualification Exam \$55

Crop Hail Adjuster

____ Crop Hail Adjuster Examination \$55

Restricted Travel Exams

Please contact the Association of Canadian Travel Agencies and Advisors (ACTA)

Phone: 1-888-257-2282 **Email:** tae@acta.ca

PLEASE SPECIFY THE DATE YOU WISH TO WRITE _____

All exams are conducted in Regina at the Council office located at 310-2631 28th Avenue, Regina.

Understanding

I understand that I must present valid photo identification upon arrival at the exam center as evidence that I am the person registered to write the exam(s). I understand that I will not be allowed to write the exam(s) without such identification.

There is no exception to this requirement.

I understand the information contained in this document is intended for the purposes of writing an exam(s) in order to be eligible to apply for a license as an insurance agent or an adjuster. The information collected is subject to the Privacy Guidelines of the Insurance Council of Saskatchewan.

SIGNATURE

DATE

Please send the completed Licensing Examination Application Form with the appropriate fee to:

Insurance Council of Saskatchewan

Attn: Exam Coordinator

310-2631 28th Avenue

Regina, SK S4S 6X3

Phone: 306-347-0862

Email: info@skcouncil.sk.ca

Office Use Only	Date Confirmed
------------------------	-----------------------

Time Allotted by Exam Type

Property & Casualty Adjuster Representative

General Insurance Council Bylaw 1 hour

Crop Hail Agent (Insurance)

Crop Hail Agent Qualification 1 hour

Crop Hail Adjuster

Crop Hail Adjuster Qualification 1.5 hours

CREDIT CARD INFORMATION

Please ensure that the credit card information provided on the Licensing Examination Application Form is accurate. For your security and privacy, all credit card information will be processed promptly and shredded once the payment is processed.

Name on Card: _____

MasterCard or Visa Card Number: _____

Expiration Date: _____ CVV: _____

Signature: _____

Date: _____

Scent-Free Office

The Insurance Council of Saskatchewan (Council) has instituted a scent-free environment for all employees and visitors. The use of scented products is not allowed in the Council office. Scented products include, but are not limited to, hair spray, perfume, cologne, deodorant, and other fragranced personal care items. Council reserves the right to refuse an individual from writing the exam(s) if a heavy scent is detected. Individuals who are denied entry due to scent will be required to reschedule and pay the exam fee again.

Registration

All individuals wishing to write licensing exams in Saskatchewan must register with Council a minimum of forty-eight hours prior to the exam sitting date. Exam registrations must include the completed Licensing Examination Application Form and exam payment. Acceptable methods of payment are Visa or MasterCard. Council corresponds with individuals via email. Please ensure that your handwriting is clear, and that all information provided is accurate to prevent delays in scheduling your exam.

Registration is based on the availability of space.

All exams are conducted in Regina at the Council office located at 310-2631 28th Avenue, Regina.

No Show for Exam/Postpone/Cancellation

Individuals who do not show up, postpone, or cancel an exam sitting will forfeit the registration fee. A new exam registration and payment must be submitted before scheduling another exam. No refunds or fee transfers will be provided.

Arrival at the Exam Centre

Individuals must arrive at the exam center at least 15 minutes before the scheduled exam start time and present valid identification. Photo ID is mandatory. In some cases, Council may request additional identification that confirms the individual's residential address.

Exam Room

Once the exam begins, talking is strictly prohibited. Any individual who disrupts the exam will be asked to leave and will forfeit their exam sitting.

Pass Mark

The pass mark for all exams is 75%.

Study Material

For information about study materials and entry exam details for Crop Hail Agent and Crop Hail Adjusters, please visit www.skCouncil.sk.ca.

The hail insurance study guide can be found here: [Hail Study Guide](#).

Exam Results

Exam marks will be sent by email only.
