



1.) Name of Applicant: Last First Middle Initial (Mr.,Mrs.,Ms.,Miss)

2.) Residence Address: Mailing Address (Street, Box, R.R., Site)

City Province Postal Code

3.) Date of Birth: Day / Month / Year 4.) Residence Telephone: ()

5.) Social Insurance Number: 6.) Are you a permanent resident or citizen of Canada? Yes No

7.) Name of Agency and Trade Name (If any):

8.) Business Address (in your home jurisdiction): Street/Box/R.R./Site City, Province

Postal Code Business Telephone Business Fax

9.) Email Address: 10.) Sponsor:

11.) Class of Licence(s) Applied For: Life and Accident & Sickness Insurance Agent (\$240)
Accident & Sickness Agent (\$90) Life Insurance Agent (\$150)

(As a reminder, a Life Agent who has not held any type of life insurance agent licence for one (1) continuous year, must complete the one-page Supervision Certificate available on Council's website under Printable Forms.)

12.) Are you currently the holder of any other class of licence to deal with the public? (If yes, provide details below) Yes No

Provide details of the licence(s) you hold and how you obtained the licence(s)

13.) Are you applying for a: (Check ONLY One) New Licence Transfer/Amendment

14.) Have you ever had, used, operated under, or carried on business under any name other than the name mentioned in Question 1 of this form, or have you ever been known under any other name? Name changes resulting from marriage (e.g. maiden name), divorce, court order, or any other process should be listed here giving appropriate dates.

Yes No Previous Name Date

DO NOT WRITE BELOW THIS LINE

Table with 2 columns: Exam Fees (maximum of 3 writes in a 6 month period) and Licence Fee

Application Forms are valid for six months from the date the sponsoring insurance company / insurer signs the Recommendation Section.

15.) Are you currently or do you plan to engage in any business, occupation, or economic activity other than as an Insurance Agent?

Yes No If **Yes**, please provide details _____

I understand that I must, at the time of taking any other occupation or employment, report the other occupation or employment to the Insurance Council of Manitoba prior to commencing such activities and I undertake to do so.

16.) Have you at any time: (Provide **FULL** particulars on the lines given below or attach a separate sheet if you answer **Yes** to any of the following questions)

- (a) been licensed as an insurance agent in Manitoba or elsewhere? If yes, attach details. Yes No
(Non-Residents must attach a certificate of status including history check from home jurisdiction)
- (b) had any licence held by you suspended, cancelled or revoked, or have you been subject to any disciplinary action by any regulatory authority? Yes No
- (c) been refused an insurance agent licence, mutual fund licence, securities licence or real estate licence in Manitoba or elsewhere? Yes No
- (d) been convicted of a criminal offence or received a conditional discharge? Yes No
If yes, provide the original copy of the Security Clearance done by fingerprints.
- (e) been subject to personal bankruptcy or engaged in any business which has been subject to bankruptcy proceedings? If yes, provide a copy of the bankruptcy discharge or a copy of the documents that were filed with your trustee including the list of creditors. Yes No
- (f) been a defendant in any proceeding wherein fraud was alleged? Yes No
- (g) been discharged for cause by an employer? Yes No

17.) Are there any criminal charges pending against you under the law of any province, state or country?

If yes, please provide full particulars. Yes No

18.) Employment History for the previous **five years** (include months and years) including periods of unemployment, present employment and date of termination of such employment:

Employer's Name and Address	Date-From	Date-To	Position Held and Reason for Leaving

19.) I will maintain Professional Liability Insurance (Errors & Omissions) as required under Section 371 (1.1) of the Insurance Act of Manitoba in accordance with Section 12 of the Agents & Adjusters Regulation. (**Attach a copy of coverage**)

I understand that I shall not carry on the activities of an insurance agent while I am not insured under a policy of liability insurance that meets the requirements of the Insurance Act of Manitoba. Furthermore, I understand that I must notify the Insurance Council of Manitoba without delay if my liability insurance lapses, or is cancelled by myself or the insurer, pursuant to Section 372.1(2) of the Insurance Act of Manitoba, and I undertake to do so.

Yes No

20.) I have attached an **ORIGINAL SECURITY CLEARANCE FORM** (Criminal Record Check) as part of Council's licence application review process. (**NOTE: Those submitting renewal or transfer applications are not required to obtain criminal record checks, unless answered "YES"**)

Yes No

Consent and Notification

21.) This Consent and Notification is pursuant to the Personal Information Protection and Electronic Documents Act (PIPEDA).

I consent to the Insurance Council of Manitoba collecting such additional information about me as may be necessary to complete or verify the information contained in my application to become an insurance agent/broker of Manitoba. The sources the Insurance Council of Manitoba may use are athletic associations; financial institutions; police forces (federal, provincial, municipal and foreign); current and former employers; credit bureaus; business associations; foreign governments; bankruptcy offices; insurance companies; Ministries of Finance and Consumer and Commercial Relations; Employment and Immigration; Registrar General; governments of other provinces.

Principal Purposes for which the personal information is intended to be used:

- to determine whether I am qualified and suitable to obtain the licence I am applying for on this application form and to consult with other regulatory bodies; and
- to use and disclose such information for purposes which are consistent with the purpose set out in the previous clause.

Certification

The undersigned individual hereby certifies that the foregoing statements are true and correct to the best of my knowledge, information and belief and hereby undertakes to notify the Insurance Council of Manitoba in writing of any material change therein, within 15 days of such change.

The undersigned individual hereby further certifies that I am conversant with the provisions of *The Insurance Act* of Manitoba, its Regulations, the Licensing Rules and Code of Conduct and will act in accordance with those provisions.

The undersigned applicant acknowledges and consents that the Insurance Council of Manitoba may obtain any information whatsoever, from any source, as permitted by law in any jurisdiction in Canada or elsewhere.

Dated this _____ day of _____, _____

Signature of Applicant

22.) **Declaration Section**

- (I) I understand that it is against the law of this province:
 - (a) to Act as an agent or solicitor of insurance without having obtained a licence to act as an insurance agent.
 - (b) to misrepresent any condition of a policy.
 - (c) to make or use any misleading statement purporting to show the dividends, profits or surplus which have been paid or may be paid by the insurer in respect of any policy issued or to be issued by it.
 - (d) to rebate any part of the premium or commission or offer any valuable consideration as an inducement to take insurance, other than that clearly expressed in the policy.
- (II) I understand that the Insurance Council of Manitoba is empowered to suspend, revoke or cancel my licence or take other disciplinary measures, should I contravene any of the provisions of the Insurance Act of Manitoba, the regulations under the Act, the Life Insurance Agents and Accident and Sickness Insurance Agents Licensing Rules or the Life Insurance Code of Conduct.
- (III) In accordance with the Insurance Act of Manitoba, the making of a false statement on this application constitutes a material mis-statement and may result in the refusal of this application and the subsequent suspension or revocation of any licence issued. This application is required to be personally signed by the applicant named herein.
- (IV) I declare:
 - (a) that I have read carefully and understood all information within this application.
 - (b) that this application is not made for the purpose of obtaining a licence to act as an insurance agent solely in respect of any particular individual risk or risks, or merely to obtain an agents commission for the insurance of my own life or the lives of my family, employer, or fellow employees.
 - (c) that this application is made in good faith upon my own behalf and not on behalf of any person who is not competent to receive a licence, and upon receipt of a licence pursuant hereto, I intend to hold myself out publicly and carry on business in good faith as an insurance agent.
 - (d) that I, the undersigned, hereby say that all statements and answers in the foregoing application are true and correct and I hereby authorize the Insurance Council of Manitoba to undertake a criminal record check, or conduct other investigations in connection with this or any other application.

Signature of Applicant

Signature of Witness

Date

Print Name and Address of Witness

23.) **Recommendation Section – (Sponsoring Insurer) - MUST be completed by an authorized appointee with the company.**

The qualification and record of the applicant have been investigated and all statements and answers in the foregoing application are true and correct to the best of my knowledge, information and belief. The applicant is a trustworthy and a competent person to receive a licence. It is understood, if and when this applicant is terminated, written notice will be given to the Insurance Council of Manitoba including the reason for termination.

Section 370(3.1) – Duty of care of person or insurer giving approval

No person or insurer who for the purposes of subsection (2) is authorized under this Act to approve a licence application shall recommend the applicant for an insurance agent licence unless the person or the insurer has implemented reasonable screening procedures to determine if the applicant is a suitable person to receive the licence.

I recommend that the applicant be granted an insurance agent licence to act for:

Name of Insurer: _____

Date	Signature	Print Name	Official Capacity
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CAUTION

It is an offence under *The Insurance Act* of Manitoba to procure or attempt to procure registration by knowingly making any false or fraudulent representation or declaration. Filing of any false information or failure to disclose full information required by or on this application may result in its rejection or in disciplinary or other actions or proceedings being taken against the applicant and/or ICM within the provisions of *The Insurance Act* of Manitoba, the Regulations, or Code of Conduct, or may result in a refusal to register the applicant.

Insurance Council of Manitoba

INITIAL LIFE LICENCE SUPERVISION CERTIFICATE

I, _____, certify that I am currently licensed in Manitoba and am the
(Print Name of Supervising Agent)

holder of a Life Insurance Agent Licence and have held such licence for three (3) continuous years. I agree to review all insurance related material used or prepared by _____
(Print Name of Initial Life Licensee)

and will ensure that the insurance being applied for is appropriate to the needs and circumstances for each applicant and/or insured. I have read and understand and agree to comply with Section 9 of the Life Insurance Agents and Accident & Sickness Insurance Agents Licensing Rules.

As the qualified supervisor of the above noted agent, I understand and agree to abide by the provisions stated above and that should I be in breach of the agreement, the Insurance Council of Manitoba has the authority to revoke my supervision status.

Signature of Supervising Agent

Date

I certify that I will provide to the supervisor signing this Certificate, a copy of all material for each case. I further understand and agree to comply with all licensing requirements and operate within the guidelines set out in the Insurance Act of Manitoba and the regulations under the Act, the Life Insurance Agents and Accident & Sickness Insurance Agents Licensing Rules and the Life Insurance Agent Code of Conduct.

Initial Life Licensee Signature

Date

Instructions

The Licensees signing the Certificate must retain a copy of this Certificate for their records. Certificates evidencing **ORIGINAL SIGNATURES MUST** be filed with the Insurance Council of Manitoba office.

The holder of a life insurance agent licence who has not held any type of life insurance agent licence for one (1) continuous year must be supervised by an agent who holds a valid life insurance agent licence and has held it for at least three continuous years immediately before the date of the declaration.

Life and Accident & Sickness Insurance Agent's Licensing Procedures

Resident Applicant's

Applying for a Licence

Effective January 1, 2003, the Level I examination was no longer recognized in the province of Manitoba for the purpose of qualifying as a new life insurance agent. Completion of the Life Licence Qualification Program (LLQP) and examination is the only recognized way for entry-level agents to obtain a licence. In addition, the LLQP includes updated standards to reflect the skills necessary to do accident and sickness insurance business in today's marketplace. The LLQP pre-training course components dealing with accident and sickness insurance and the LLQP examination to test that material has become mandatory for new applicants for a separate accident and sickness or an accident & sickness **only** licence effective January 1, 2003.

Manitoba's licensing year runs from JUNE 1 to MAY 31 and licence fees are not prorated. Licences are valid for a maximum of 12 months and must be renewed annually. The expiry date for **ALL** licences is May 31. This means if a licence is issued with an effective date of May 1, the licence will expire May 31 of that same year.

Continuing Education Credit Hours (CEC's)

- Life Insurance Agents must accumulate, in each licence year, 15 CEC's
- Accident & Sickness Agents must accumulate, in each licence year, 15 CEC's

If you are the holder of both a Life Insurance Agent Licence and a separate Accident & Sickness Insurance Agent Licence, you only need to accumulate 15 continuing education credit hours for the licensing year.

The licence of an agent who fails to comply with continuing education will not be renewed until that agent has provided Council with the required number of credit hours.

All agents must comply with the Insurance Act of Manitoba, the Life Insurance Agents and Accident and Sickness Insurance Agents Licensing Rules and the Life Insurance and Accident and Sickness Agent's Code of Conduct.

Completing the Application

The four page application form must be completed in full. The application can be printed from our web-site under Printable Forms. A Criminal Record Check must accompany first applications for licensing. This document can be obtained from your local RCMP detachment or municipal police department in advance to determine the processing requirements, cost of the service, and hours the service is available in your jurisdiction. Individuals who have a conviction must have their Criminal Record Check done by fingerprints. This process could take up to six months. As a reminder, Criminal Record Checks are only valid for six months from the date of issue.

To ensure proper completion of the application, the following steps have been set out. Applications received that are incomplete will be returned to the applicant. **Please note the completion of an application or the passing of an examination does not guarantee the issue of a licence. Each applicant must be found suitable to hold a licence.**

1. Complete questions 1-6 with your personal data.
2. Complete question 7 if you will be holding out in a business name and/or trade name. If you will be operating in a corporate or trade name, you must register the name with the Manitoba Companies Office at (204) 945-2500. A copy of the Articles must accompany the application.
3. Complete question 8 with the FULL business address, telephone and fax number in your home jurisdiction.

4. Complete question 9 with your email address.
5. Complete question 10 with the name of your sponsoring insurance company that you will be representing.
6. Complete question 11 by checking off the class of licence you will be applying for. As a reminder, Section 7 of the Life Insurance Agents and Accident and Sickness Insurance Agents Licensing Rules reads,

“The holder of a life insurance agent licence who has not held it for at least one (1) continuous year

- *must be supervised by a supervising agent;*
 - *must identify, by declaration submitted to the council, the individual who will be his or her supervising agent; and*
 - *must provide the council with the supervising agent's agreement to act and any other information that the council requires about the supervising agent.”*
7. Complete question 12 by checking either yes or no. If you have checked **yes**, you must provide details of the licence(s) you hold and how you obtained the licence(s).
 8. Complete question 13 by checking only one of the choices given as you are either applying for a new licence or a transfer/amendment.
 9. Complete questions 14 and 15 by checking either yes or no. If the answer is yes, you are required to provide details.
 10. Complete question 16 (a-g) in full and provide details and documentation where requested.
 11. Complete question 17 by checking either yes or no. If your answer is yes, please provide full particulars.
 12. Complete question 18 with your present employment as well as your previous employment for the past five years.
 13. Complete question 19 by checking either yes or no. In addition, you must attach a copy of your Errors and Omissions insurance. Coverage must be at minimum in the amount of \$1,000,000 per any one occurrence with an overall policy aggregate of \$5,000,000.
 14. Complete question 20 by checking either yes or no. In addition, you must attach an original Security Clearance Form (Criminal Record Check) if you are a new applicant or have not held a licence within the past 12 months. Individuals who have a conviction must have their Criminal Record Check done by fingerprints. This process could take up to six months. (As a reminder, Criminal Record Checks are only valid for six months from the date of issue.)
 15. Complete question 21 by signing and dating the consent form.
 16. Complete question 22 by signing and dating before a witness.
 17. Question 23 must be completed by the sponsoring company you will be representing. If you are employed with an agency you must be sponsored by the insurance company that the agency currently represents.

Additional Information

- Applicants must take the LLQP course of their choice with the Course Provider (a listing is available on our web-site) and successfully complete the certification examination with that Course Provider. Once the applicant obtains their certificate of course completion, they must apply to our office with the fully completed four page application form and their original certificate of course completion. **NOTE: Council will photo-copy the original certificate and return it to the applicant.** Following the certification examination, applicants must take and pass a written qualification examination set by the Council. Each applicant is allowed three attempts within a six month period from the anniversary of their first write. Please see the "Examination Information" Sheet for further exam instructions.
 - Examination fee is - \$110.00

- **NO PERSONAL CHEQUES will be accepted for the examination fee.** The Insurance Council of Manitoba accepts CASH, MONEY ORDER OR COMPANY CHEQUES only for the examination fee. If you are writing or re-writing outside of Winnipeg, you must pre-pay your examination fee. An applicant is not entitled to more than three examinations in any period of six months.
- The licence fee does not have to be paid prior to writing the examination. An applicant may wish to pay the licence fee following the successful completion of the examination. Cheque or Money Order must be in Canadian funds and made payable to the "Insurance Council of Manitoba."
- The Licence fees are as follows:
 - Life and Accident & Sickness Licenses \$240.00
 - Life Licence \$150.00
 - Accident & Sickness Licence \$90.00
- Licence renewal forms and instruction sheets are mailed out to agents in mid April.
- Address changes are to be reported to the Insurance Council of Manitoba immediately in writing. Applicants that move from another jurisdiction to Manitoba must satisfy Manitoba's licensing requirements to receive a licence.

Non-Resident Applicant's

Agents who are licensed outside of Manitoba and wish to obtain a Life Insurance Agent Licence and/or Accident & Sickness Insurance Agent Licence in Manitoba must submit the following documentation to our office for eligibility to obtain a Manitoba licence:

- Fully complete the four page Life and/or Accident & Sickness Application Form. (Ensure to have the Manitoba licensed sponsoring insurance company complete the Recommendation Section.) If you are having trouble completing the application form, please see "completing the application" in order to assist you.
- Complete a Supervision Certificate if you are the holder of a life insurance agent licence who has not held any type of life insurance agent licence for one continuous year.
- A Criminal Record Check must accompany first applications for licensing. For Canadian residents, this document must be obtained from your local RCMP detachment or municipal police department in advance to determine the processing requirements, cost of the service, and hours the service is available in your jurisdiction. For United States residents, this document must be obtained from the Federal Bureau of Investigation (FBI). Individuals who have a conviction must have their Criminal Record Check done by fingerprints. This process could take up to six months. (As a reminder, Criminal Record Checks are only valid for six months from the date of issue.)
- Attach the licence fee (payable to the "Insurance Council of Manitoba" **in Canadian funds only**). The licence fees are as follows:
 - Life and Accident & Sickness Licenses \$240.00
 - Life Licence \$150.00
 - Accident & Sickness Licence \$90.00
- Attach a copy of your Errors & Omissions Insurance in the required Manitoba amounts. E&O insurance must be obtained through a licensed insurance company in Manitoba.
- Attach an original Non-Resident Endorsement Form (also known as a Certificate of Authority/Certificate of Status) not more than 60 days old from your home jurisdiction. This non-resident endorsement form must also include a "history check" (a history check shows

what exam(s) the agent has completed, how long the agent has been licensed, any breaks in licensing, and additional education that the agent has completed).

- If you will be operating in a business name and/or trade name, you must ensure that the business name is registered/incorporated in Manitoba. To register/incorporate a name, please contact the Manitoba Companies Office at (204) 945-2500. A copy of the Articles of Registration/Incorporation in which you will receive from the Manitoba Companies Office must accompany the completed application form(s).
- **US Residents only:** A curriculum vitae (CV) must be received which will enable Council to review your experience, education, and background in the industry. All US residents must have completed the Life Licence Qualification Program (LLQP) in order to obtain a Manitoba licence.

Reminders:

- Manitoba's Licensing Year runs from June 1 - May 31 and licence fees are not prorated. Licences are valid for a maximum of 12 months and must be renewed annually which means that the expiry date is the 31st of May.
- All licensees are required to accumulate in each licensing year, the required number of continuing education credit hours. Both Life Insurance Agents and Accident & Sickness Insurance Agents are to accumulate 15 hours of continuing education. If you are the holder of both a Life Insurance Agent Licence and a separate Accident & Sickness Insurance Agent Licence, you only need to accumulate 15 continuing education credit hours for the licensing year.
- Additional information about the LLQP (FAQ's, Course Curriculum, sample exam questions, etc.) can be found on the [CCIR-CCRRA](#) web-site.