

# APPLICATION FOR COMMISSIONER'S BOARDS AND COMMITTEES

(This form is not for submission)

\*Resume for online submission required

## PERSONAL INFORMATION

First Name:

Middle Name:

Last Name:

DOB:

SSN#:

Gender:

County:

Business Title:

Company:

Address:

Phone & ext:

Fax:

Email:

## OTHER NAMES USED

Reason Used:

First Name:

Middle Name:

Last Name:

From - To:

## POSITIONS SOUGHT

1st Choice:

2nd Choice:

3rd Choice:

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## PROFESSIONAL HISTORY

Title:

Employer:

Type of Business:

City, State: **CALIFORNIA**

From – To Date:

## EDUCATION

School Name:

Major:

Degree Obtained:

City, State: **CALIFORNIA**

From – To Date:

## PROFESSIONAL LICENSES

Name on License:

Type of License:

License Number:

From – To Date:

## PROFESSIONAL CERTIFICATES

Name on Certificate:

Type of Certificate:

Certificate Number:

From – To Date:

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## PROFESSIONAL ORGANIZATIONS AND SOCIETIES

Organization/Society:

Position:

From – To Date:

## QUESTIONNAIRE

- 1) Please share your reason(s) for seeking appointment to this Board/Committee.
- 2) How did you find out about this position?
- 3) Have you ever run for political office, served on a political committee, or been identified publicly with a particular political organization, candidate or issue?

If yes, please explain:

- 4) Have you been publicly identified, in person or by organizational members, with a particularly controversial nation, state or local issue?

If yes, please explain:

- 5) Have you ever submitted oral or written views to any government authority or the news media, on any particular controversial issue other than in an official government capacity?

If yes, please explain:

- 6) Have you ever written any particularly controversial books or articles?

If yes, please explain:

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- 7) Have you ever had any association with any person or group or business venture which could be used, even unfairly, to impugn or question your character and qualifications for the requested appointment?

If yes, please explain:

- 8) Do you know anyone who might take any steps, overtly or covertly, to oppose your appointment?

If yes, please explain:

- 9) Are you currently or formerly a(n):

Agent:

Exclusive:

Independent:

Broker:

Types of Insurance:

Auto:

Crime and Surety:

Earthquake:

Life:

Homeowner's:

General Liability:

Property:

Title:

Workers' Compensation:

Other:

- 10) Has any professional license held by you been the subject of disciplinary action?

If yes, please explain. Include the dates, and specify any fines, suspensions, revocations or other sanctions resulting from disciplinary actions. Also list any Cease and Desist Orders, Restraining Orders or Injunctions entered against you or any business entity with which you have been affiliated.

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11) Have you ever surrendered or failed to renew any license to avoid the possibility of regulatory action against you?

12) Are you a citizen of a country other than the United States?

If yes, list country:

13) Have you ever been affiliated (as an officer, owner, director, trustee, partner, advisor or consultant) with any institutions (corporations, firms, partnerships, business enterprises, non-profit organizations, etc.) which might present a conflict of interest or appearance of conflict of interest with your requested appointment?

If yes, please explain:

14) Do you own real property, personal property, or financial holdings that might present a potential conflict of interest or appearance of conflict of interest with your requested appointment?

If yes, please explain:

15) Are you currently under federal, state or local investigation for possible violations of a criminal law, or ordinance?

If yes, please explain:

16) Have you ever been convicted of a crime?

If yes, please explain and provide the State, County, and Year the conviction took place.

17) Is there anything in your background which if made known to the general public through your appointment would cause an embarrassment to you and/or the Department of Insurance?

If yes, please explain.