

# BC Level 1 Licensing Examination

## Confirmation and Consent Form

**Please complete this form in pen only.**

Applicant must bring valid photo I.D. to the exam centre (i.e., drivers licence, passport or provincial identification card)

### CURRENT INFORMATION

Please fill in your name **exactly** as it appears on your I.D.

LEGAL FIRST & MIDDLE NAMES

LEGAL LAST NAME

\_\_\_\_\_

\_\_\_\_\_

**RESIDENCE:** ADDRESS

CITY/PROVINCE

POSTAL CODE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE

DATE OF BIRTH

EMAIL

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I plan to pursue:*     Broker     Independent Adjuster     Undecided

### CONSENT

I \_\_\_\_\_ give consent to  
[NAME]

- sharing my name, exam grade, and any pertinent information relating to my Level 1 Licensing examination with the Insurance Council of British Columbia,
- receive electronic communications from the Insurance Institute containing news, updates, and promotions.  
*You may withdraw your consent at any time.*

SIGNATURE

DATE

\_\_\_\_\_

\_\_\_\_\_



**Insurance Institute**  
British Columbia

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