



STATE OF KANSAS

INSURANCE LICENSING CANDIDATE HANDBOOK

OCTOBER 2008

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QUICK REFERENCE

STATE LICENSING INFORMATION

Candidates may contact the Kansas Insurance Department with questions about obtaining or maintaining a license after the examination has been passed.

Kansas Insurance Department

Producers Division
420 S.W. Ninth Street
Topeka, KS 66612-1678
Phone: (785) 296-7862
Fax: (785) 368-7019

Web site

www.ksinsurance.org

EXAMINATION INFORMATION

Candidates may contact Pearson VUE with questions about this handbook or about an upcoming examination.

Pearson VUE Kansas Insurance

PO Box 8588
Philadelphia, PA 19101-8588
(888) 204-6255

Web site

www.pearsonvue.com

RESERVATIONS

Before making an exam reservation

Candidates should thoroughly review this handbook, which contains examination content outlines and important information regarding eligibility and the examination and licensing application process.

Making an exam reservation

Candidates may make a reservation by:

- Calling Pearson VUE at (888) 204-6255
- Faxing the *Fax Reservation Form*, found in the back of the handbook, to Pearson VUE at (888) 204-6291
- Visiting the Pearson VUE web site at www.pearsonvue.com

Candidates should make a reservation by phone at least one (1) business day before the desired examination date, or by fax or on the web at least four (4) business days before the desired examination date. **WALK-IN EXAMINATIONS ARE NOT AVAILABLE.**

SCHEDULES & FEES

Test Center locations

A list of Test Centers appears on the back cover of this handbook. Candidates should contact Pearson VUE to confirm specific locations and examination schedules.

Exam fees

The examination fee must be paid at the time of reservation by credit card, debit card, voucher, or electronic check. **Fees will not be accepted at the test center.** Examination fees are non-refundable and non-transferable, except as detailed in *Change/Cancel Policy* (page 6).

EXAM DAY

What to bring to the exam

Candidates should bring to the examination the confirmation number they received when they made the examination reservation, proper identification, and other materials as dictated by the state licensing agency. A complete list appears in *What to Bring* (page 9).

Exam procedures

Candidates should report to the Test Center at least thirty (30) minutes before the examination begins to complete registration. The time allotted for the examination is on the back cover, and each candidate will leave the test center with an official score report in hand.

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The candidate handbook is a useful tool in preparing for an examination.

Before taking an examination, it is highly recommended that the Kansas Insurance handbook be reviewed, with special attention given to the content outlines. (*content outlines begin on page S1 of this handbook*)

Individuals who wish to obtain an insurance license in the state of Kansas must:

1. Apply for license.

Submit the Uniform Application for Resident Individual License, found in the back of this handbook, with the application fee (\$30) to the Kansas Insurance Department. Candidates may apply in advance of actually taking the exam.

2. Make a reservation and pay examination fee.

Make a reservation (by phone or fax or online) with Pearson VUE for the examination. (*See page 5*)

3. Go to the test center to take the examination.

Go to the test center on the day of the examination, bringing along all required materials. (*See page 9*)

4. Apply for a license.

After passing the examination, if you haven't already done so, apply for your license by submitting the Uniform Application for Resident Individual License. The application can be found in the back of this handbook. Along with the application a \$30 application fee must be sent to the Kansas Insurance Department.

For more information regarding obtaining a license go to www.ksinsurance.org.

CONTACT INFORMATION

Candidates may contact Pearson VUE with questions about this handbook or an examination, or may contact the Kansas Insurance Department with questions about obtaining or maintaining a license.

FOR STATE LICENSING

Kansas Insurance Department

Producers Division
420 S.W. Ninth Street
Topeka, KS 66612-1678
Phone: (785) 296-7862
Fax: (785) 368-7019

Web site

www.ksinsurance.org

FOR EXAMINATIONS

Pearson VUE

Kansas Insurance
PO Box 8588
Philadelphia, PA 19101-8588
(888) 204-6255

Web site

www.pearsonvue.com

PRACTICE TESTS

Practice tests are offered exclusively online at www.pearsonvue.com.

THE LICENSURE PROCESS

Licensure is the process by which an agency of state government or other jurisdiction grants permission to individuals to engage in the practice of a particular profession, vocation, or occupation, and prohibits all others from legally practicing that profession. By ensuring a minimum level of competence, the licensure process protects the general public. The state regulatory agency is responsible for establishing the acceptable level of safe practice and for determining whether an individual meets that standard.

The state of Kansas has retained the services of Pearson VUE to develop and administer its insurance licensing examination program. Pearson VUE is a leading provider of assessment services to regulatory agencies and national associations.

PRACTICE TESTS

Practice tests are offered exclusively online at www.pearsonvue.com, giving candidates even more opportunity to succeed on insurance examinations. Our practice tests will not only prepare candidates for the types of questions they will see on the licensure exam, but also familiarize them with taking computer-based examinations.

Pearson VUE offers practice tests in the areas of Life, Health, and Property and Casualty that contain questions developed by subject matter experts using concepts found in the general portion of the licensure examination. The tests closely reflect the format of the real licensure examination, can be scored instantly, and provide immediate feedback to help candidates identify correct and incorrect answers. Candidates can purchase practice tests anytime at www.pearsonvue.com.

REQUIREMENTS FOR LICENSURE IN KANSAS

DETERMINING THE QUALIFICATIONS OF A CANDIDATE

Candidates will receive a Kansas insurance producer's license after the Kansas Insurance Department receives the application and appropriate documentation, and determines if the candidate is qualified.

LICENSURE IN KANSAS

Candidates who would like to transact insurance business as an insurance producer in Kansas must pass the appropriate examination (resident applicant), apply for and be granted a license by the Kansas Insurance Department, and be appointed by an insurance company.

- Variable Contracts producers require NASD registration and a Life Producer license, but no separate exam is required.
- Excess Lines, Auto Club, Travel and Viatical Settlement licenses do not require an examination. Candidates may contact the Kansas Insurance Department for application instructions.

RESIDENT LICENSE APPLICATION PROCEDURE

1. Candidates should review this handbook and the latest Examination Content Outline Supplement, study the topics listed in the content outlines, and then take the appropriate examination.
2. Candidates may wish to go to the library to review a standard statute reference for Kansas. Statutes are also available by contacting the office of the Secretary of State for Kansas at (785) 296-4557.
3. Candidates should submit the Uniform Application for Resident Individual License, found in the back of this handbook, with the application fee (\$30) to the Kansas Insurance Department. Candidates may apply in advance of actually taking the exam.
4. Candidates applying for a Title, Crop, or Bail Bond license should indicate the line being applied for under O - Other - Limited Line on page 2 of the Uniform Application for Resident Individual License.
5. Proof of NASD registration is required for Variable Contracts authority.

Once licensed, candidates should continue to keep their insurance knowledge current and meet continuing education requirements.

MAJOR LINES EXAMS

Candidates may choose to take the major lines individually or as a combined exam. Possible combinations are listed below.

- Life—can be taken individually or with Accident & Health
- Accident and Health—can be taken individually or with Life
- Property and Allied Lines—can be taken individually or with Casualty and Allied Lines
- Casualty and Allied Lines—can be taken individually or with Property and Allied Lines
- Personal Lines

On combination exams, candidates' performance is reflected as one score. Each examination covers the general principle(s) sections for the line, as well as covering state specific rules and regulations. On combination exams, candidates must pass the entire combined exam to qualify for a Kansas insurance license.

LIMITED LINES

The limited lines listed below may be taken as individual examinations, with a non-combined major lines examination (above), or with one other limited line.

- Kansas Laws and Regulations
- Crop Insurance
- Title Insurance

Please note that bail bond producers are required to pass the Kansas Laws and Regulations exam only.

CERTIFICATION REQUIREMENTS

The state of Kansas issues a renewable producer license. Candidates are required to maintain an accurate record of the insurance companies who have certified them.

Once the producer's license is received, candidates should advise each company they wish to represent of their qualifications and standing and ask for certification. Insurance companies are required to submit an appointment for each producer they certify.

The company is responsible for paying the certification fees and will be billed for the fees. The certification fee is \$2 for each producer or agency appointed by a Kansas-domiciled company or \$5 for each producer or agency appointed by a foreign-domiciled company.

TERMINATIONS

If an insurance company needs to terminate a producer or agency, the proper form is required. The form is submitted at time of termination, and no fees are required.

CONTINUING EDUCATION REQUIREMENTS

The state of Kansas requires that insurance producers meet Continuing Education (CE) requirements after being licensed. Major lines require at least one hour of instruction in insurance ethics, and a producer may submit no more than three continuing education hours in insurance agency management.

Producers must provide evidence of compliance to CE standards every two years. For those producers who were born in an odd-numbered year, the biennial due date is the producer's date of birth in each odd year. For those producers born in an even-numbered year, the biennial due date is the producer's date of birth in each even year. Such due date shall not be earlier than two years following the producer's initial licensure.

Continuing Education Biennial Requirements

LICENSES	HOUR REQUIREMENTS
Life and/or Health Authority	12
Property and/or Casualty Authority including Personal Lines	12
Crop (only)	2
Title (only)	4
Pre-need (only)	2

REQUIREMENTS FOR BAIL BOND PRODUCERS

Please note that bail bond producers are required to pass the Kansas Laws and Regulations exam only.

Candidates whose Kansas license has expired for failure to comply with the CE requirements and who wish to be relicensed must pay a reinstatement fee and provide proof that they have completed approved CE programs. The Kansas Insurance Department will issue a confirmation of compliance, and the producer may then request certification from an insurance company.

ADMINISTRATIVE SUPPORT SERVICES

Producer Desktop is now online. Kansas insurance producers may now conduct business with the Department through this new service. They can request an address change, print individual licenses and wallet cards, and download certification letters. Future applications will include online continuing education and license renewal, as well as initial licensing and virtually all other producer requests that can be automated.

CHANGE OF NAME OR ADDRESS

Producers should report any change in address or name to the Kansas Insurance Department within thirty (30) days of the change. When there is a legal name change, the Kansas Insurance Department will issue a corrected license. There is no fee for this service.

CHANGE OF AGENCIES

The Kansas Insurance Department should be notified immediately if a producer changes agencies.

REQUIREMENTS FOR RETAKING AN EXAM

Candidates must wait at least twenty-four (24) hours before scheduling an appointment to retest.

Candidates who fail the examination the first time must wait at least seven (7) calendar days between the first and second examination attempt, and between the second and third attempt. After the third and subsequent attempts, candidates must wait six (6) months. If it has been at least two (2) years since the last attempt, candidates will start over as a first-time candidate.

PHONE RESERVATIONS

Walk-in examinations are not available. Candidates may call Pearson VUE at (888) 204-6255* to make a reservation.

CUSTOMER CARE HOURS	
Monday – Friday	7 am – 10 pm
Saturday	7 am – 4 pm
Sunday	9 am – 3 pm

Central Standard Time

Before calling, candidates should have the following:

- Legal name, address, Social Security number, daytime telephone number, and date of birth
- The name of the examination(s)
- The preferred examination date and test center location (a list of test centers appears at the end of this handbook)
- A failing score report (if retaking an examination)

Candidates are responsible for knowing which examination they need to take. A call center representative will help candidates select a convenient examination date and location and will answer questions. The reservation will be made based on the next available examination date.

Candidates **MUST** make a phone reservation at least one (1) day before the desired examination date.

FAX RESERVATIONS

Candidates may fax the Fax Reservation Form (from Appendix) to Pearson VUE at (888) 204-6291, 24 hours a day, 7 days a week. The completed form should be faxed at least four (4) business days before the desired examination date. A confirmation of the reservation will be returned by fax within 24 hours of receipt of the faxed request.

ONLINE RESERVATIONS

Candidates may make a reservation online by visiting the Pearson VUE web site (www.pearsonvue.com). First-time users will be required to obtain a check-in code and will be asked to provide name, email address and phone number, as well as a personal password. Candidates will receive a check-in code immediately upon submitting the requested information.

Candidates will be prompted with step-by-step instructions on completing the online Reservation Request Form. An online request may be canceled **before** the completed Reservation Request Form has been submitted by clicking on *Check Out/Cancel This Request*. Once the online request has been submitted, Pearson VUE will send via email a confirmation of the examination date, time and location, or will contact candidates whose choices are not available. Candidates should make an online reservation at least four (4) days before the desired examination date.

*TELECOMMUNICATION DEVICES FOR THE DEAF

Pearson VUE is equipped with TDD (Telecommunication Devices for the Deaf) to assist deaf and hearing-impaired candidates. TDD calling is available 7:00 am to 4:00 pm (CST) Monday through Friday, toll-free at (800) 274-2617.

This TDD phone option is for individuals equipped with compatible TDD machinery.

CONFIRMATION NUMBER

Candidates will be provided with a confirmation number, which should be written down in the space provided below. This number should be used for any contact with Pearson VUE.

Confirmation Number:
Examination Date:
Test Center:
Pearson VUE Representative:

EXAM FEES

The exam fee, \$61 for combination major lines and \$54 for single line or limited line examinations, must be paid at the time of reservation by credit card, debit card, voucher or electronic check. **Fees will NOT be accepted at the test center.** Examination fees are non-refundable and non-transferable, except as detailed in *Change/Cancel Policy*.

Electronic Checks

Candidates who choose to pay the examination fee by electronic check must have a personal checking account, and must be prepared to provide to Pearson VUE at the time of reservation the following information:

- Bank name
- Account number and routing number
- Social Security number, state-ID number or driver's license number
- Name and address on the account

Using this information, Pearson VUE can request payment from the candidate's bank account just as if the candidate had submitted an actual paper check.

Vouchers

Candidates may pre-pay examination fees and receive a voucher to use when they contact Pearson VUE to make an examination reservation. The number listed on the voucher will be accepted by Pearson VUE as payment for the examination fee. Vouchers may be purchased for one fee or many; therefore, companies may buy vouchers in bulk and distribute them to candidates as desired.

Those who wish to purchase a voucher should send a *Voucher Request Form* (found in the back of this handbook), along with proper payment. Pearson VUE will process voucher requests within one (1) week of receipt. Vouchers are valid for one (1) year from the issue date.

CHANGE/CANCEL POLICY

Candidates should call Pearson VUE at (888) 204-6255 two (2) days before the examination to change or cancel a reservation. Candidates who change or cancel a reservation with proper notice may transfer the fee to a new reservation, or may request a refund. **Candidates who change or cancel a reservation without proper notice will forfeit the examination fee.** Refunds for credit/debit cards are immediate, while refunds for electronic checks and vouchers will be processed in 2-3 weeks.

Candidates are individually liable for the full amount of the examination fee once a reservation has been made, whether **paid** individually or by a third party.

ABSENCE/LATENESS POLICY

Candidates who are late to or absent from an examination may be excused for the following reasons:

- Illness of the candidate or that of the candidate's immediate family member
- Death in the immediate family
- Disabling traffic accident
- Court appearance or jury duty
- Military duty
- Weather emergency

Candidates who are absent from or late to an examination and have not changed or canceled the reservation according to *Change/Cancel Policy* will not be admitted to the examination and will forfeit the examination fee. Written verification and supporting documentation for excused absences must be submitted to Pearson VUE within fourteen (14) days of the original examination date.

WEATHER DELAYS AND CANCELLATIONS

If severe weather or a natural disaster makes the Test Center inaccessible or unsafe, the examination may be delayed or canceled. Candidates should contact Pearson VUE at (800) 274-2615 for details on delays and cancellations during severe weather.

SPECIAL EXAM REQUESTS & SERVICES

Pearson VUE complies with the provisions of the Americans with Disabilities Act (42 U.S.C. 12101 *et seq.*) and Title VII of the Civil Rights Act, as amended (42 U.S.C. 2000e *et seq.*), in accommodating disabled candidates who need special arrangements to take an examination.

Candidates who require special arrangements due to impaired sensory, manual or speaking skills, or other disability, should fax the *Special Accommodations Request Form* (found in the back of this handbook) to Pearson VUE.

The form must be accompanied by supporting documentation from a physician or other qualified professional reflecting a diagnosis of the candidate's condition and an explanation of examination aids or modifications. Pearson VUE will provide auxiliary aids and services, except where such may fundamentally alter the examination or results, or result in an undue burden. The examination will be scheduled upon receipt of all required information by Pearson VUE.

Candidates who have additional questions concerning ADA arrangements may contact the ADA Coordinator at (800) 274-3707. However, the *Special Accommodations Request Form*, along with the required supporting documentation, MUST be submitted to Pearson VUE before any special examination arrangements can be finalized.

Pearson VUE will determine the time and place of specially arranged examinations and will confirm these arrangements directly with the candidate. Candidates who need to retake an examination should notify Pearson VUE that special arrangements were used for the previous examination.

Due to the unique nature of each special request, Pearson VUE recommends that candidates request special services as early as possible. Pearson VUE will make a concerted effort to provide reasonable accommodations as permitted by state licensing agencies and individual Test Center capabilities.

ENGLISH AS A SECOND LANGUAGE (ESL)

Candidates for whom English is a second language may request additional time for the examination by sending the *Special Accommodations Request Form* (found in the back of this handbook). Candidates should include with this form a letter from his/her English instructor or sponsoring company (on official letterhead, if from a company) stating that English is not a primary language for the candidate. Candidates should not attempt to make a reservation until after they have been notified by Pearson VUE that their request for additional time has been approved. Candidates who have additional questions about ESL examinations should contact the Special Examination Coordinator at (800) 274-3444, extension 5391.

NON-SATURDAY EXAMS

Candidates who for religious reasons cannot take an examination offered only on Saturdays may request a non-Saturday examination date. Such a request must be put in writing on official stationery by the candidate's religious advisor and faxed to (610) 617-9397 or mailed to:

Pearson VUE
3 Bala Plaza West, Suite 300
Bala Cynwyd, PA 19004

Non-Saturday examinations are available only on a prearranged basis.

WHAT TO BRING

Required Materials

All candidates are required to bring identification that is deemed acceptable, listed under *Acceptable Forms of Candidate Identification*, to the test center on the day of examination.

Candidates who have changed their names must provide written documentation of the change. This documentation may be a copy of a marriage license, divorce decree or other official document.

Candidates who do not present the required items will be denied admission to the examination, considered absent, and will forfeit the examination fee..

Suggested Materials

- Failing score report (if the candidate is retaking an examination)
- The confirmation number provided at the time of reservation.

Acceptable Forms of Candidate Identification

Candidate must present two forms of current signature identification. The primary identification must be government issued, photo-bearing with a signature and the secondary identification must contain a valid signature. Identification must be in English.

Primary ID (photograph, and signature, not expired)

- Government-issued Driver's License
- U.S. Dept of State Drivers License
- U.S. Learner's Permit (plastic card only with photo and signature)
- National/State/Country Identification Card
- Passport
- Passport cards
- Military ID
- Military ID for spouses and dependents
- Alien Registration Card (Green Card, Permanent Resident Visa)

Secondary ID (signature, not expired)

- U.S. Social Security Card
- Debit/(ATM) Card
- any form of ID on the Primary list

If the ID presented has an embedded signature that is not present (microchip), difficult or impossible to read, the candidate must present another form of identification from the primary or secondary list which contains a visible signature.

Pearson VUE does not recognize grace periods. For example, if a candidate's driver's license expired yesterday and the state allows a 30-day grace period for renewing the ID, the ID is considered to be expired.

EXAM PROCEDURES

Candidates should report to the test center thirty (30) minutes before the examination and check in with the test center administrator. The candidate's identification and other documentation will be reviewed and they will be photographed for the score report.

If the *Candidate Rules Agreement* is not followed and/or cheating or tampering with the examination is suspected it will be reported as such, and the appropriate

REQUIRED MATERIALS

Candidates who do not present the required items will be denied admission to the examination, considered absent, and will forfeit the examination fee.

action will be taken. The examination fee will not be refunded, the exam may be determined invalid, and/or the state may take further action such as decertification.

Candidates will have an opportunity to take a tutorial on the PC on which the examination will be administered. The time spent on this tutorial will not reduce the examination time. The examination administrators will answer questions, but candidates should be aware that the administrators are not familiar with the content of the examinations or with the state's licensing requirements. Examination administrators have been instructed not to advise candidates on requirements for licensure.

Once candidates are familiar with the PC, they may begin the examination. The examination begins the moment a candidate looks at the first examination question. The time allotted for each examination is detailed on the back cover of the handbook. After the examination time has expired, the examination will automatically end. Candidates will leave the test center with their official scores in hand.

ABOUT THE EXAM

The content of the general examination is based upon information obtained from a job analysis performed by Pearson VUE. Responses from insurance professionals were analyzed to determine the nature and scope of tasks they perform and the knowledge and skills needed to perform them. This information is the basis upon which examination questions are written and ensures that examinations reflect the practice of insurance. The examination has been developed to reflect the laws, statutes, rules and regulations for the practice of insurance in Kansas, and has been reviewed and approved by Kansas insurance professionals.

Each major line examination is given in a multiple-choice format and consists of two parts. The general section deals with basic insurance product knowledge. The state section deals with insurance laws, rules, regulations, and practices that are unique to Kansas.

The passing score for the examination is determined by the Kansas Insurance Department. Through standardization and control, Pearson VUE ensures that no individual has an unfair disadvantage or advantage because of a particular examination format.

Pearson VUE maintains examination administration and examination security standards designed to ensure that all candidates are given the same opportunity to demonstrate their abilities and to prevent some candidates from gaining an unfair advantage over others because of testing irregularities or misconduct. Pearson VUE routinely reviews irregularities and examination scores believed to be earned under unusual or nonstandard circumstances.

Pearson VUE maintains the right to question any examination score whose validity is in doubt because the score may have been obtained unfairly. Pearson VUE first undertakes a confidential review of the circumstances contributing to the questions about score validity. If there is sufficient cause to question the score, Pearson VUE will refer the matter to the state licensing agency, which will make the final decision on whether or not to cancel the score.

The performance of all candidates is monitored and may be analyzed statistically for the purpose of detecting and verifying fraud. If it is determined that a score has questionable validity, the Insurance Department will be so notified and will determine whether the candidate's scores will be released.

EXAMINATION QUESTIONS

All examination questions, each form of the examination, and any other examination materials are copyrighted and are the property of Pearson VUE. Consequently, any distribution of the examination content or materials through any form of reproduction or oral or written communication is strictly prohibited and punishable by law.

The examination will contain “pretest” questions. Pretest questions are questions on which statistical information is being collected for use in constructing future examinations. Responses to pretest questions do not affect a candidate’s score. Pretest questions are mixed in with the scored questions and are not identified.

SCORE REPORTING

When candidates complete the examination, they will receive a score report marked “pass” or “fail”. Candidates who pass the examination will receive a score report that includes information on how to apply for a license.

Candidates who fail the examination will receive a score report that includes a numeric score and diagnostic information, as well as information about reexamination. **Additional information may be found in the *Requirements for Retaking an Exam* section on page 4. Reservations for reexamination are not made at the Test Center, and candidates must wait twenty-four (24) hours before making one.**

REVIEW OF EXAMS

For security reasons, examination material is not available for candidates to review.

SCORE EXPLANATION

The passing score of the exam is determined by the Kansas Insurance Department. Thorough standardization and control, Pearson VUE ensures that no individual has an unfair advantage or disadvantage because of a particular examination format. The passing score required on each examination is 70%.

DUPLICATE SCORE REPORTS

Candidates may request a duplicate score report from Pearson VUE by completing the form in the back of this handbook and submitting it along with the correct fees.

QUESTIONS OR COMMENTS ABOUT THE EXAM

For security reasons, examination material is not available to candidates for review. Candidates who have questions, comments, or concerns about the examinations, or who wish to verify any data held in Pearson VUE files, should direct written inquiries to the address provided on the inside front cover of this handbook.

In all correspondence, candidates should provide their name and address information. If questions or comments concern an examination already taken, candidates should also include:

- (1) the name of the examination
- (2) the date the examination was taken
- (3) the location of the test center
- (4) the confirmation number

TEST CENTER POLICIES

The following policies are observed at each test center. **Candidates who violate any of these policies will not be permitted to finish the examination and will be dismissed from the test center, forfeiting the examination fee.**

- **No personal items are allowed in the testing room.** Personal items include but are not limited to: cellular phones, hand-held computers/ personal digital assistants (PDAs) or other electronic devices, pagers, watches, wallets, purses, firearms or other weapons, hats, bags, coats, books, and/or notes, pens or pencils.
- Candidates must store all personal items in a secure area as indicated by the administrator, or return items to their vehicle. All electronic devices must be turned off before storing them in a locker. **The test center is not responsible for lost, stolen or misplaced personal items.**
- Studying **is not** allowed in the test center. Visitors, children, family or friends **are not** allowed in the test center.
- Dictionaries, books, papers (including scratch paper), and reference materials are not permitted in the examination room (unless permitted by the exam sponsor), and candidates are strongly urged not to bring such materials to the test center. Upon entering and being seated in the testing room, the test administrator will provide the candidate with materials to make notes or calculations and any other items specified by the exam sponsor. **The candidate may not write on these items before the exam begins or remove these items from the testing room.**
- Eating, drinking, or chewing gum, smoking and/or making noise that creates a disturbance for other candidates is prohibited during the exam.
- Break policies are established by the exam sponsor. Most sponsors allow unscheduled breaks. To request an unscheduled break, the candidate **must** raise their hand to get the administrator's attention. **The exam clock will not stop while the candidate is taking a break.**
- Candidates must leave the testing room for all breaks. However, candidates **are not permitted to leave the floor or building for any reason during this time, unless specified by the administrator and the exam sponsor.** If a candidate is discovered to have left the floor or building they will not be permitted to proceed with the examination and may forfeit the exam fees.
- While taking a break, candidates are permitted to access personal items that are being stored during the exam only if necessary— for example, personal medication that must be taken at a specific time. **However, a candidate must receive permission from the administrator prior to accessing personal items that have been stored.** Candidates are **not** allowed access to other items, including but not limited to, cellular phones, PDAs, exam notes and study guides, unless the exam sponsor specifically permits this.
- Any candidate discovered causing a disturbance of any kind or engaging in any kind of misconduct—giving or receiving help; using notes, books, or other aids; taking part in an act of impersonation; or removing examination materials or notes from the examination room—will be summarily dismissed from the examination and will be reported to the state licensing agency. Decisions regarding disciplinary measures are the responsibility of the state licensing agency.

HOW TO PREPARE FOR THE EXAM

Examination scores are based on the number of questions answered correctly. Candidates who are uncertain about the correct answer to a question may be able to eliminate one or more of the answer choices as incorrect. It is always better to guess at the correct answer than to not answer a question because there is no penalty for incorrect answers.

CONTENT OUTLINES

Each examination is based on a detailed content outline of topics, subtopics, and references to applicable state laws, statutes and regulations. These content outlines are provided to publishers of study materials and to state-approved education providers for their use in developing and updating their educational materials and programs. Content outlines are updated periodically to reflect changes in practice, state laws and regulations. Kansas offers these content outlines as part of the handbook.

Candidates may obtain copies of the Kansas Insurance Content Outlines by visiting the Pearson VUE web site (www.pearsonvue.com).

STUDY MATERIALS

Neither the Kansas Insurance Department nor Pearson VUE specifically endorses any particular study materials. Candidates are encouraged to visit the Kansas Insurance Department web site at www.ksinsurance.org for more information.

**Click here for detailed
content outlines.**

GUIDELINES FOR ANSWERING BACKGROUND INFORMATION

WHEN ANSWERING QUESTION 1 OF THE BACKGROUND INFORMATION ON THE UNIFORM APPLICATION FOR RESIDENT INDIVIDUAL INSURANCE PRODUCER LICENSE CONSIDER THE FOLLOWING:

Traffic Violations

1. Minor traffic violations need not be disclosed.
2. For the purpose of the application, the following are **not** considered minor traffic violations and must be disclosed.
 - a. Vehicular homicide.
 - b. Making false statements on an application for a driver's license.
 - c. Any crime punishable as a felony wherein a motor vehicle was used in the perpetration of such crime.
 - d. Leaving the scene of an accident without stopping to report it.
 - e. Failing to maintain continuous motor vehicle liability insurance.

Expungement

1. A conviction for which an order of expungement has been granted need not be disclosed.
2. Generally, convictions are not automatically expunged. If you are unsure whether a particular conviction has been expunged, you should contact the clerk of the court where conviction occurred.

Time Limits

1. Except for the crimes listed in #2 below, you may answer "No" to Question 1 if **both** of the following apply:
 - a. 10 years or more have elapsed since you were convicted or released from probation or parole, whichever is later, for any **misdemeanor**; **AND**
 - b. 15 years or more have elapsed since you were convicted or released from probation or parole, whichever is later, for any **felony**.
2. Regardless of time limits outlined in #1 above, you must answer "Yes" to Question 1 if you have been convicted of any of the following:

a. Robbery	j. Obstruction of Justice
b. Burglary	k. Contempt of Court
c. Larceny	l. Habitually Giving Worthless Checks
d. Embezzlement	m. Making a False Writing
e. Theft	n. Perjury
f. Tax Evasion	o. Deceptive Commercial Practices
g. Arson	p. Bribery
h. Forgery	q. Fraud
i. Counterfeiting	r. Any other crime, not specifically mentioned, that involved money, fraud, deceit, or untruthfulness

"Yes" Responses

If you answered "Yes" to Question 1, please provide all details of each offense on a separate sheet of paper, including, but not limited to:

1. Name and address of arresting agency.
2. Location and date of arrest and/or conviction.
3. Nature of the charge or charges.
4. Name and address of the convicting court.
5. Disposition rendered by the court.
6. Whether you are serving probation or parole as of the date of your application.

Note: — *Failure to provide the above requested information in connection with a "Yes" response delays the processing of your application. Any omissions or false answers on the application and any supplementary pages attached may result in denial of your application.*

Please note the application may be revised on a bi-annual basis. To ensure you are filing the current version of the application, please reference the National Insurance Producer Registry web site at www.nipr.com.



Uniform Application for Individual Insurance Producer License

(Please Print or Type)

Check appropriate box for license requested.

- Resident License
- Non-Resident License
 - Identify Home State: _____
 - Identify Home State License #: _____

Demographic Information

① Soc. Security Number - -		② If assigned, National Producer Number (NPN)	
③ If applicable, NASD Individual Central Registration Depository (CRD) Number		④ Are you affiliated with a financial institution/bank? Yes <input type="checkbox"/> No <input type="checkbox"/>	
⑤ Last Name JR./SR. etc	⑥ First Name	⑦ Middle Name	⑧ Date of Birth (month) ___ (day) ___ (year) ___
⑨ Residence/Home Address (Physical Street)	⑩ P.O. Box	⑪ City	⑫ State ⑬ Zip Code ⑭ Foreign Country
⑮ Home Phone Number () -	⑯ Gender (Circle One) Male Female	⑰ Are you a Citizen of the United States? (Check One) Yes <input type="checkbox"/> No <input type="checkbox"/> (If No, of which country are you a citizen?) (If No, you must supply proof of eligibility to work in the U.S.)	
⑱ Business Entity Name			
⑲ Business Address (Physical Street)	⑳ P.O. Box	㉑ City	㉒ State ㉓ Zip Code ㉔ Foreign Country
㉕ Business Phone Number (include extension) () -	㉖ Business Fax Number () -	㉗ Business E-Mail Address	㉘ Business Web Site Address
㉙ Applicant's Mailing Address	㉚ P.O. Box	㉛ City	㉜ State ㉝ Zip Code ㉞ Foreign Country
㉟ a. List any other assumed, fictitious, alias, maiden or trade names which you have used in the past. b. List any trade names under which you are currently doing business or intend to do business.			

Agency or Business Entity Affiliations

③⑥ List your Insurance Agency Affiliations: (Complete only if the applicant is to be licensed as an active member of the business entity)

FEIN _____	NPN _____	Name of Agency _____
FEIN _____	NPN _____	Name of Agency _____
FEIN _____	NPN _____	Name of Agency _____

Employment History

③⑦ Account for all time for the past five years. Give all employment experience starting with your current employer working back five years. Include full and part-time work, self-employment, military service, unemployment and full-time education.

Name	From		To		Position Held
	Month	Year	Month	Year	
City State Foreign Country					
Name					
City State Foreign Country					
Name					
City State Foreign Country					
Name					
City State Foreign Country					

(State Use)

Please note the application may be revised on a bi-annual basis. To ensure you are filing the current version of the application, please reference the National Insurance Producer Registry web site at www.nipr.com.



Uniform Application for Individual Insurance Producer License

Jurisdiction and Type of License Requested

38 Next to each jurisdiction, check the license type(s) and line(s) of authority for which you are applying.

License Types: A – Agent B – Broker P – Producer SLP – Surplus Lines Producer

Lines of Authority: V – Variable Life/Variable Annuity L – Life H – Accident & Health or Sickness P – Property C – Casualty PL – Personal Lines

Limited Lines: Credit – Credit CR – Car Rental CROP – Crop T – Travel S – Surety O – Other: Specify Type

Jurisdiction	License Type				Major Lines of Authority						Limited Lines of Authority					
	A	B	P	SLP	V	L	H	P	C	PL	Credit	CR	CROP	T	S	O
AK																
AL																
AR																
AZ																
CA																
CO																
CT																
DC																
DE																
FL																
GA																
GU																
HI																
IA																
ID																
IL																
IN																
KS																
KY																
LA																
MA																
MD																
ME																
MI																
MN																
MO																
MS																
MT																
NC																
ND																
NE																
NH																
NJ																
NM																
NV																
NY																
OH																
OK																
OR																
PA																
PR																
RI																
SC																
SD																
TN																
TX																
UT																
VI																
VA																
VT																
WA																
WI																
WV																
WY																



Uniform Application for Individual Insurance Producer License

Background Information

59) The Applicant must read the following very carefully and answer every question. All copies of documents must be certified. All written statements submitted by the Applicant must include an original signature.

1. Have you ever been convicted of a crime, had a judgment withheld or deferred, or are you currently charged with committing a crime? Yes ___ No ___
 "Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations or convictions involving driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.

If you answer yes, you must attach to this application:

- a) a written statement explaining the circumstances of each incident,
- b) a certified copy of the charging document,
- c) a certified copy of the official document, which demonstrates the resolution of the charges or any final judgment, and

If you have a felony conviction, have you applied for a waiver as required by 18 USC 1033? N/A ___ Yes ___ No ___

If so, was that waiver granted? (Attach copy of 1033 waiver approved by home state.) N/A ___ Yes ___ No ___

2. Have you or any business in which you are or were an owner, partner, officer or director, or member or manager of limited liability company, ever been involved in an administrative proceeding regarding any professional or occupational license, or registration? Yes ___ No ___

"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license.

"Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a) a written statement identifying the type of license and explaining the circumstances of each incident,
- b) a certified copy of the Notice of Hearing or other document that states the charges and allegations, and
- c) a certified copy of the official document, which demonstrates the resolution of the charges or any final judgment.

3. Has any demand been made or judgment rendered against you or any business in which you are or were an owner, partner, officer or director, or member or manager of limited liability company, for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? Only include bankruptcies that involve funds held on behalf of others. Yes ___ No ___

If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment, and/or type and location of bankruptcy.

4. Have you been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement? Yes ___ No ___

If you answer yes, identify the jurisdiction(s): _____

5. Are you currently a party to, or have you ever been found liable in, any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? Yes ___ No ___

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident,
- b) a certified copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, and
- c) a certified copy of the official document, which demonstrates the resolution of the charges or any final judgment.

6. Have you or any business in which you are or were an owner, partner, officer or director, or member or manager of limited liability company, ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct? Yes ___ No ___

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and
- b) certified copies of all relevant documents.

7. Do you have a child support obligation in arrearage? Yes ___ No ___

If you answer yes,

- a) by how many months are you in arrearage? _____ Months
- b) are you currently subject to a repayment agreement? Yes ___ No ___
- c) are you the subject of a child support related subpoena/warrant? Yes ___ No ___

Please note the application may be revised on a bi-annual basis. To ensure you are filing the current version of the application, please reference the National Insurance Producer Registry web site at www.nipr.com.



Uniform Application for Individual Insurance Producer License

Applicant's Certification and Attestation

40 The Applicant must read the following very carefully:

1. I hereby certify that, under penalty of perjury, all of the information submitted in this application and attachments is true and complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license revocation or denial of the license and may subject me to civil or criminal penalties.
2. Where required by law, I hereby designate the Commissioner, Director or Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to be my agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner, Director or Superintendent of Insurance, or other appropriate party of that jurisdiction is of the same legal force and validity as personal service upon myself.
3. I further certify that I grant permission to the Commissioner, Director or Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to verify information with any federal, state or local government agency, current or former employer, or insurance company.
4. I further certify that, under penalty of perjury, a) I have no child-support obligation, b) I have a child-support obligation and I am currently in compliance with that obligation, or c) I have identified my child support obligation arrearage on this application.
5. I authorize the jurisdictions to give any information concerning me, as permitted by law, to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
6. I acknowledge that I understand and will comply with the insurance laws and regulations of the jurisdictions to which I am applying for licensure.
7. For Non-Resident License Applications, I certify that I am licensed and in good standing in my home state/resident state for the lines of authority requested from the non-resident state.
8. As part of the resident licensing process pursuant to applicable state law, resident applicant acknowledges that the submission of his or her fingerprint record will be submitted to a secured centralized repository maintained by the National Association of Insurance Commissioners ("NAIC") as authorized by the state insurance department pursuant to a memorandum of understanding between participating state insurance departments and the NAIC. The resident applicant acknowledges the fingerprint record will be stored at the NAIC and transmitted to law enforcement agencies for the purpose of determining Applicant's qualification for licensure. *(Applicable only to residents of Alaska)*

Month/Day/Year

Original Producer Signature

Full Legal Name (Printed or Typed)

Attachments

41 The following attachments must accompany the application otherwise the application may be returned unprocessed or considered deficient.

1. For Non-Resident License Applications and unless otherwise noted in the State Matrix of Business Rules, a state will rely on an electronic verification of an Applicant's resident license through the NAIC's State Producer Licensing Database in lieu of requiring an original Letter of Certification from the resident state.
2. Any jurisdiction specific attachments listed in the State Matrix of Business Rules (www.nipr.com).

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VOUCHER REQUEST FORM



PLEASE PRINT CLEARLY

Date:		
Last Name:		
First Name:		M.I.:
Address:		
City:		State:
		ZIP:
Daytime Telephone:		Evening Phone:
Email Address (if you would like Pearson VUE to email the voucher#):		
Payment Type: <input type="checkbox"/> Money Order <input type="checkbox"/> Company Check <input type="checkbox"/> Cashier's Check		
Name of Examination:		
<p style="text-align: center;">Make all checks payable to Pearson VUE and mail this form to: Pearson VUE, c/o AP Voucher Program, PO Box 41508, Philadelphia, PA 19101-1508. Overnight Address: Pearson VUE, c/o AP Voucher Program, 3 Bala Plaza West, Suite 300, Bala Cynwyd, PA 19004.</p>		



DUPLICATE SCORE REQUEST

DIRECTIONS: You may use this form to request that Pearson VUE send a duplicate copy of your score to you. Please print or type all information on this form.

Please enclose cashier's check or money order made payable to "Pearson VUE." **DO NOT SEND CASH.**

FEE: For scores less than one year old there is a \$10.00 charge.
For scores one or more years old there is a \$25.00 charge.

SEND TO: Pearson VUE
KANSAS INSURANCE
DUPLICATE SCORE
PO Box 8588
Philadelphia, PA 19101-8588

Amount Enclosed: \$ _____

I hereby authorize Pearson VUE to send to me at the address below a duplicate of my scores from the insurance examination.

Signature	Date
-----------	------

Please complete the following form with your current name and address.

Name:		
Address:		
City:	State:	Zip:

If the above information was different at the time you tested, please indicate original information.

Name:		
Address:		
City:	State:	Zip:

Exam Taken:	Date Taken:
Date of Birth:	Confirmation Number:
Licensing Jurisdiction:	



FAX RESERVATION FORM

Today's Date:	Time of Day:	Candidate/Sponsor Signature:	
Last Name:			
First Name:			
Date of Birth:	Social Security Number:	Your Fax Number:	
Address:			
City:		State:	ZIP: Telephone:
Test Center Code:		Exam Session: <input type="checkbox"/> am <input type="checkbox"/> pm	Exam Date:
1 st Exam Code:	2 nd Exam Code:	2 nd Choice: <input type="checkbox"/> am <input type="checkbox"/> pm	2 nd Date:
School Code:	May we register you for the next exam date if your two choices are taken? <input type="checkbox"/> Yes <input type="checkbox"/> No		
May we email your confirmation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If so, include email address:			

Credit Card Payments:	Electronic Check Payments:
<input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> AmExpress <input type="checkbox"/> Discover	Bank Name:
Card #:	Next Available Check #:
Expiration Date:	Account #:
Signature:	Routing #:
	Name/Address on Account: <i>(if different from above)</i>

FOR PEARSON VUE USE ONLY

Pearson VUE ID# Assigned:		
Reservation Date:	Time:	TC#:
Pearson VUE Representative:		

Fax to Pearson VUE at (888) 204-6291.

SPECIAL ACCOMMODATIONS REQUEST FORM



Any individual who has a physical or mental impairment or limitation described as a disability under the Americans with Disabilities Act (ADA), or for whom English is a second language (ESL), may request special examination arrangements.

Candidates who wish to request special accommodations for ADA or ESL should fax this form to Pearson VUE at (610) 617-9397. Certain documentation must be faxed along with this form, as detailed on page 10-11. **All requests must first be approved by Pearson VUE. Candidates must wait for confirmation of the approval before scheduling an examination.**

PLEASE PRINT CLEARLY

Date:			
Last Name:			
First Name:		M.I.:	
Address:			
City:		State:	Zip:
Daytime Telephone:		Email address:	
Description of Disability:			
<input type="checkbox"/> Large-print written exam <input type="checkbox"/> Marker <input type="checkbox"/> Additional time <input type="checkbox"/> Reader <input type="checkbox"/> Separate testing room <input type="checkbox"/> Sign language interpreter			
<input type="checkbox"/> Other equipment or accommodation (please explain):			
Accommodations previously provided to you (<i>list accommodation and purpose, such as "sign language interpreter for SAT examination"</i>):			
<input type="checkbox"/> English as a second language			
Candidates should contact Pearson VUE with questions about special accommodations. Pearson VUE Special Accommodations • 3 Bala Plaza West, Suite 300 • Bala Cynwyd, PA 19004 Phone (800) 274-3707 • TDD (800) 274-2617 • Fax (610) 617-9397			

Note: Only candidates who require special examination accommodations should use this form.

GENERAL INFORMATION

**CANDIDATES MAY CALL (888) 204-6255 TO MAKE AN EXAM RESERVATION.
CANDIDATES MAY TEST AT ANY TEST CENTER.**

TEST CENTERS IN KANSAS		
CODE	LOCATION	SCHEDULE
1705	Overland Park	Monday through Saturday
1706	Wichita	Tuesday through Saturday
1707	Topeka	2 days a week
1708	Hays	2nd and 4th Saturday of the month

Locations and schedules are subject to change.

AVAILABLE EXAMINATIONS AND FEES			
EXAM CODE	EXAM NAME	EXAM TIME ALLOTTED	FEES
01	Life	1.5 hours	\$54
02	Accident & Health	1.5 hours	\$54
55	Personal Lines	1.5 hours	\$54
31	Crop	1.5 hours	\$54
83	Title	1.5 hours	\$54
03	Property and Allied Lines	1.5 hours	\$54
04	Casualty and Allied Lines	1.5 hours	\$54
07	Kansas Laws, Rules and Regulations	1.5 hours	\$54

AVAILABLE EXAMINATION COMBINATIONS AND FEES			
EXAM CODE	EXAM NAME	EXAM TIME ALLOTTED	FEES
05	Life and Accident & Health	2.5 hours	\$61
06	Property, Casualty and Allied Lines	2.5 hours	\$61

*The examination combinations listed above may be taken during one session.
All examinations must be requested at the time of reservation.*

HOLIDAY SCHEDULE

No exams on the following holidays:

New Year's Day Memorial Day Labor Day Christmas Day
Martin Luther King, Jr. Day Independence Day Thanksgiving Day

