

Advisory Board and Committee Application

Board or Committee Name of Interest:

Biographical Information

_____ First Name	_____ Middle Name	_____ Last Name		
_____ Drivers License Number	_____ Agents License Number (if applicable)	_____ Date of Birth	_____ How long have you been a Texas resident?	
_____ Home Phone	_____ Work Phone	_____ Cell Phone	_____ Spouse's Name	
_____ Home Address: Street	_____ City	_____ State	_____ ZIP Code	_____ County
_____ Email Address	Have you filed your federal income tax for the past 5 years?		Yes	No
TDI may release my email address in response to a public information request		Yes - Agree	No - Do not agree	

Employment Information

_____ Employer	_____ Job Title		
_____ Employer Address: Street	_____ City	_____ State	_____ ZIP Code
Job Responsibilities			

Education/Training

_____ Technical, Vocational, or Business School	_____ Type of Degree	_____ Field of Study
_____ Undergraduate College or University	_____ Type of Degree	_____ Field of Study
_____ Graduate College or University	_____ Type of Degree	_____ Field of Study

References

Reference Name _____ Phone _____ Email _____

Reference Name _____ Phone _____ Email _____

Reference Name _____ Phone _____ Email _____

Professional Memberships

Volunteer Participation

Area of Experience or Expertise

Check box beside areas of experience or expertise.

Consumer Issues Casualty Insurance Property Insurance Life Insurance Health Insurance
 Licensing Rate Regulation Other

Please describe how this experience will contribute to your service on a board or committee.

Background Information

If you answer YES to any of the following questions, please provide explanations on a separate sheet.

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|---|-----|----|
| 1. Have you ever been indicted, convicted, or had adjudication deferred of a misdemeanor or felony? | Yes | No |
| 2. Are you, or any company in which you have a controlling interest in, delinquent in any local, state, or federal taxes? | Yes | No |
| 3. Have you ever had a grievance or complaint filed with any entity that regulates your professional license(s)? | Yes | No |
| 4. Have you ever had any fines, suspensions, revocations, investigations, or other actions taken against any professional license you hold? | Yes | No |
| 5. Have you been investigated, reprimanded, fined, or suspended from doing business with any state or federal agency in the last 10 years? | Yes | No |
| 6. Do you have a financial interest in any company that does business with the State of Texas? | Yes | No |
| 7. Do you serve on any local or state board, commission, committee, or in any elected office? | Yes | No |
| 8. Are you an officer, director, employee, or consultant of an insurance company, insurance agency, agent, broker, solicitor, adjuster, insurance industry-related association, or any other entity or person regulated by TDI? | Yes | No |
| 9. Are you related to or reside in the same household as a person who is an officer, director, employee, or consultant of an entity or person regulated by TDI? | Yes | No |
| 10. Do you own, have a financial interest in, or participate in the management of an organization regulated by TDI? | Yes | No |
| 11. Are you related to or reside in the same household as a person who owns, has a financial interest in, or participates in the management of an organization regulated by TDI? | Yes | No |
| 12. Is or has any entity in which you are or were an officer, director, or employee of been a defendant in a lawsuit or the subject of an adverse administrative or regulatory action? | Yes | No |
| 13. Are you engaged or employed by an organization that has a contract with an organization regulated by TDI? | Yes | No |
| 14. Are you associated with any unit of government? | Yes | No |
| 15. Are you associated with any organization that receives funding from any unit of government? | Yes | No |
| 16. Are you associated with any organization formed for the purpose of representing persons or organizations regulated by TDI? | Yes | No |
| 17. Are you required to register as a lobbyist with the Texas Ethics Commission? | Yes | No |
| 18. Are you related to or reside in the same household as a person required to register as a lobbyist with the Texas Ethics Commission? | Yes | No |
| 19. Are you, or have you been, a defendant in a lawsuit or the subject of an adverse administrative or regulatory action? | Yes | No |

I affirm the information on this form is true, accurate, and complete. I also authorize the Texas Department of Insurance to conduct a background investigation.

Signature Required

Date

The information provided on this form may be revealed publicly.

Return completed form to:

Texas Department of Insurance
External Relations - Government Relations (MC-ER)
PO Box 12030 Austin, TX 78711-2030
Email: governmentrelations@tdi.texas.gov
Phone: (512) 676-6605

Email Addresses

Under most circumstances, individual email addresses are protected by the Texas Public Information Act. Sharing this information for purposes of processing your information does not waive these confidentiality protections. However, you may affirmatively consent to release of your email address in response to a public information request or inquiry. If you would like more information about the public or confidential nature of information maintained by TDI, please consult our Open Records Policy and our Website Privacy Policy. This form is encrypted to meet privacy requirements.

Your Rights

You can request information we have about you by emailing OpenRecords@tdi.texas.gov or writing to: Public Information Coordinator, Texas Department of Insurance, P.O. Box 12030 (mail code GC-ORO) Austin, Texas 78711-2030. You also have the right to ask that we fix information we have about you that is wrong. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be fixed, and (3) the reason or proof showing why the information is wrong. Send this by email to RecordCorrections@tdi.texas.gov or by mail to: Record Correction Request, Texas Department of Insurance, P.O. Box 12030 (mail code CO-AAL-CC), Austin, Texas 78711-2030.