

2012 Host Carrier Agreement

Professional Insurance Agents Association of Ohio, Inc.



Internship Program

Host Carrier _____

Name of Contact _____

Address _____ City _____ State _____ Zip _____

Phone Number _____ Email _____

Please check all that apply:

We are interested in hosting _____ (1, 2 or 3) interns

We would like our intern to work on the following projects during his/her time with us (examples: work with our marketing department, shadow company representatives, evaluate data, etc)

We are interested in hosting, but unable to participate this year. Please contact us next year.

This program is under consideration. Please contact _____ (name)
at _____ (phone) to discuss in more detail.

Note: Invoices will be mailed at the start of the 2012 program. Carrier host fees are \$5,000

Signature

Title

Date

Important Dates in 2012:

Orientation - Thursday, May 31, 2012

Company Experience Begins - Monday, June 4, 2012*

Agency Experience Begins - Monday, July 9, 2012*

Wrap-Up Session - Friday, August 10, 2012

*Dates subject to change based on University Scheduling

Please return completed form to:
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Professional Insurance Agents Association of Ohio, Inc.
600 Cross Pointe Road
Gahanna, OH 43230
Phone: (800) 555-1742 Fax (614) 552-0115
Email: charlie@ohiopia.com