



Lawrence Technological University
PROFESSIONAL DEVELOPMENT CENTER



INSURANCE STUDIES CLASS SCHEDULE
SPRING 2009

Course No.	Course Name	Day / Time	Start date	No. of weeks
AIC 33	The Claims Environment	MONDAY • 5:30 PM	02/09/09	13
AIC 35	Property Loss Adjusting	WEDNESDAY • 5:30 PM	02/11/09	13
AIC 36	Liability Claim Practices	THURSDAY • 5:30 PM	02/12/09	13
ARM 54	Risk Assessment	THURSDAY • 5:30 PM	02/05/09	13
ARM 55	Risk Control	WEDNESDAY • 5:30 PM	02/04/09	13
ARM 56	Risk Financing	TUESDAY • 5:30 PM	02/03/09	13
API 28	Personal Insurance: Underwriting and Marketing Practices	MONDAY • 5:30 PM	02/16/09	12
INS 21	Property and Liability Insurance Principles	MONDAY • 5:30 PM	02/16/09	10
INS 23	Commercial Insurance	TUESDAY • 5:30 PM	02/10/09	11
CPCU 520	Insurance Operations, Regulation & Statutory Accounting	TUESDAY • 5:30 PM	02/03/09	15
CPCU 540	Business & Financial Analysis for Risk Mgt. & Insurance Professionals	WEDNESDAY • 5:30 PM	02/04/09	15
CPCU 551	Commercial Property Risk Management and Insurance	WEDNESDAY • 5:30 PM	02/04/09	15
CPCU 560	Financial Services Institutions	THURSDAY • 5:30 PM	02/05/09	15

REGISTER NOW

(SEE BELOW FOR REGISTRATION FORM)

248.204.4055 or PDC@ltu.edu



Lawrence Technological University
PROFESSIONAL DEVELOPMENT CENTER



2009-2010
Registration Form

(PLEASE PRINT)

Name: _____

Home Address: _____ City: _____ State: ____ Zip: _____

Home Phone: _____ Mobile: _____

Employer: _____

Business Address: _____ City: _____ State: ____ Zip: _____

Business Phone: _____ Fax: _____ Email: _____

MASTERCARD AND VISA ACCEPTED (upon approval) for full payment.

MasterCard /Visa card #: _____ Exp. Date: _____

Signature: _____ Date: _____

SIGNATURE IS REQUIRED AND SIGNIFIES YOUR AUTHORIZATION FOR CREDIT OR DEBIT CARD PAYMENT.

Make checks payable to: *Professional Development Center* and submit with registration to: PDC, Lawrence Technological University, 21000 West Ten Mile Road, Southfield, MI 48075-1058

<u>COURSE #</u>	<u>TITLE</u>	<u>TUITION / REGISTRATIN FEE</u>

PLEASE NOTE: Program registration does not include course materials or examination fees.

REQUIRED: Please check one box and sign below.

YES I will be taking this course for CE credit. (If you need CE credit you must enclose and additional dollar per CE credit. See the individual course descriptions for the number of credits approved. NOTE: You must have 80 percent attendance to be eligible for CE credits.

NO I will not be taking this course for CE credits. I do not need CE credits.

Signature: _____ Date: _____

Registration indicates that you are familiar with the cancellation policy.