

**Insurance Law
Experience Panel Application**

Name: (please print) _____

Please indicate the areas in which you are willing to take referrals.

- Automobile/property damage claims
- ERISA claims for private employers (disability, health, life and accident)
- Homeowners claims
- Medical (Patient)

Other types: long-term care, travel, title, etc./explain: _____

You must certify the following in order to be eligible to accept referrals:

I certify that I earned nine (9) hours of insurance law CLE within the past three (3) years.

I certify that at least 20% of my practice is in insurance law, and I have disclosed this percentage on my application for malpractice insurance. I practice and am qualified to accept insurance law cases, I meet the LRIS membership requirements for receiving referrals from LRIS in this area, and I will maintain compliance with the requirements as long as I accept LRIS referrals.

Date _____

Signature _____