



LAHORE INSURANCE INSTITUTE

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Ref. No. _____

Registration Form

AGENT'S FOUNDATION COURSE IN INSURANCE.

For Office Use:
LII Registration
No. _____

Name _____
(in block letter)

Father's/Husband's Name _____

Address _____

Telephone No. _____

Date of Birth _____ NIC No. _____

Educational qualifications:

Matric/'O' level _____ Year _____ Board _____

Intermediate _____ Year _____ Board _____

Bachelors Degree _____ Year _____ University _____

(Specify B.A., B.Sc., B.Com.)

Any other degree or professional diploma: _____

Working Experience:

Name of Company/Institution	Job title	From	To

Any other relevant information: _____

Dated: - _____

Signature of applicant.