



**Please Complete, Sign and Fax to 1-866-275-1213 or
Email to Taylor@CareerInsuranceAgents.com**

This non-disclosure agreement (Agreement) is between Career Insurance Agents, (CIA) and Sheri Sears _____ (Prospect). Whereas CIA and Prospect wish to exchange certain information pertaining to the operations and contractual obligations of CIA and its independent contractors, these two parties hereby agree to the following conditions:

1. CIA will provide Prospect with an original copy "Draft" of its standard Agency/Agent contract (contract). In addition, CIA will provide Prospect with additional information, both orally and in writing, as to the operations and benefits of becoming an Independent Contractor with CIA.
2. Prospect agrees not to share this information with any third parties not explicitly approved by CIA and to use reasonable and practical care to protect and maintain possession of the contract and any other materials provided to Prospect by CIA. This applies not only to all original documents, but to all copies that may have been made by or supplied to Prospect.
3. Upon request of CIA, Prospect will return all documents, materials, and notes both originals and copies to CIA within 15 days of the request.
4. In the event of a breach or threatened breach of this Agreement, CIA shall be entitled to preliminary and final injunctions, in addition to any other rights and remedies available to it at law or in equity.
5. The validity and performance of this contract are governed by the laws of the State of Colorado.
6. This Agreement is binding upon the directors, officers, employees and agents of each party and will continue indefinitely, with the obligations of confidentiality surviving the termination of this Agreement.

Career Insurance Agents:

Prospect:

Print Name _____

Print Name Sheri Sears _____

Signature _____

Signature  _____
753BCCD8DB7A4AB...

Title _____

Title 12/28/2021 _____

Date _____

Date 12/28/2021 _____

Career Insurance Agents Prospective Agent Questionnaire

***All Information is held in strictest confidence.**

Please complete the information below and either Fax to: 1-866-275-1213 or
Email to Taylor@CareerInsuranceAgents.com

How did you hear about CIA:

1. **Contact Information:** **Date:**
12/28/2021
 Name: Sheri Sears
 Address: 6220 Cleburne Hwy
 City: Granbury State: TX Zip Code: 76049
 Office PH: 8179883292 Cell PH: 817.988.3292 Fax: 8179883292
 Preferred Email: Ssears@fallcreekins.com
2. **Planned Business Location:** *(retail, office space, suite, home based)* Office space
3. **Tell us about your background:** *(Insurance, Financial, Tax Prep., what you did before...)*
 School teacher- insurance agent close to 8 years
4. **Describe Your Present Situation:** *(Captive or Independent Agency...Motivation for exploring options?)*
 Captive
5. **What are Your Most Important Needs:**
 Appointments. Support.
6. **Please describe your typical Customer Profile:** *(Preferred PL, Non-Standard PL, or Commercial – what segments...?)* P&C, commercial, life
7. **What is Your Timeline in Making a Decision:** Next 30 days
8. **Present Agency Information:**
 Written Premium Volume: To discuss
 PL% vs. CL% Split: To discuss
 Lead Carrier(s): To discuss
9. **Plans going forward:**
 Estimated Premium Year 1, 2, 3: Discuss
 Estimated Commission Income Year 1, 2, 3: Discuss
 Primary Sales Initiatives:
Discuss
10. **Additional Information:** e.g., non-completes, previous criminal convictions, carrier terminations, bankruptcy, etc...
Discuss