

ARM

(ASSOCIATE IN RISK MANAGEMENT) Classes Sponsored by the Houston Chapter of RIMS Fall Semester 2015

The Houston Chapter of the Risk and Insurance Management Society, Inc. (RIMS) will be sponsoring an ARM 55 class beginning in August. This course is part of a three semester specialty program leading to the Associate in Risk Management (ARM) Designation. The course is open to the general public, including all risk management, insurance and safety professionals.

ARM 55 - RISK ASSESSMENT AND TREATMENT

CLASS LOCATION: Bowen, Miclette & Britt

1111 North Loop West, Suite 400, Houston, Texas 77008

CLASS START DATE: Tuesday Evenings-Starting August 11, 2015 5:30 P.M. – 7:30 P.M.

(Ends November 24, 2015)

COURSE LEADER: Jim Drew, ARM, CIC

Office Phone: (713) 880-7172 E-mail:

jdrew@bmbinc.com

EXAM DATES: Oct – Dec testing window at Sylvan Testing Centers by appointment

https://www.theinstitutes.org/quide/find-exam.

COURSE DESCRIPTION: Topics include introduction to risk assessment and treatment; root cause analysis; business

continuity management; physical property risk; intellectual property and reputation risk; legal and regulatory risk; management liability; human resource risk; environmental risk;

crime and cyber risk; fleet risk.

TUITION POLICY

The tuition per course, which does NOT include the exam fee or books, is \$110 for RIMS Professional Members and \$135 for all others (including Associates of the Society). In the event the student cannot attend the class, tuition will be refunded until the <u>first night of class</u>. After the first class has been held, the student will receive a CREDIT toward any of the ARM classes that may be held during the two semesters (12 months) following the class for which tuition was already paid.

GRANTS:

Grants are available to those Professional Members who wish to take an ARM course but are unable to due to financial hardship. Candidates must apply through the Education Director (Sondra Faul), provide a letter from their employer that the course is non-reimbursable, and write a one-page letter indicating why they feel they are deserving of the grant. Recipients of the grants will be notified prior to the second meeting night of class. The deadline for submitting an application is August 1, 2015.

CONTINUING EDUCATION (C.E.) CREDIT INFORMATION:

The Texas Department of Insurance has approved this classroom course for 15 C.E. Credit hours. Students must attend at least 90% of the classes in order to qualify. The Insurance Institute of America/CPCU has also received approval for 15 C.E. hours for students who successfully pass the ARM exam. Students must choose **either** the class instruction credits or the exam credits. They may not choose both.

ORDERING BOOKS AND REGISTERING FOR THE EXAM:

Books may be ordered through the Insurance Institute at (800) 644-2101. The cost for books is approximately \$200. You may register for the exam at the same time you order your books. The cost for the exam is \$190 (for early registration). Please refer to the current AICPCU/IIA Key Information Guide for confirmation of test related fees and deadlines. You can request a catalog from the Insurance Institute via the web at http://www.theinstitutes.org/ via e-mail at customerservice@TheInstitutes.org or via phone at (800) 644-2101.

PAYMENT INFORMATION:

Make checks payable to: Houston Chapter of RIMS

To pay by credit card: Complete the credit card portion of the enrollment form

Please mail your check or credit card information and the class enrollment form to:

Sondra Faul Claims and Insurance Analyst The University of Texas Health Science Center of Houston P.O. Box 20036 OCB 1.330 Houston, Texas 77225

Houston, Texas 77225 Phone: 713-500-8127

E-mail: Sondra.K.Faul@uth.tmc.edu

**If paying by credit card instead of mailing the forms to the above address, you can fax the enrollment form and CC information to Sondra Faul, 713-500-8111.

Forms should be completed and returned no later than August 1, 2015. Please call Sondra Faul or Jim Drew for additional details concerning the class.

<u>ARM 55 CLASS ENROLLMENT FORM</u>
(Send in the original form and keep a copy for your file, unless faxing)

Course: ARM 55 Risk Assessment and Treatment

| Name of Student: | Social Security No |
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| Company: | Job Title: |
| Mailing Address: | |
| | Phone (Home): |
| Fax No.: | Email: |
| Amount Enclosed: \$ | RIMS Professional Member: YES NO |
| COST: \$110 for RIMS Profession | nal Members \$135 for All Others Including Associates |
| Payment Method: Check | Credit Card |
| CE Credit Needed: | CE License #: |
| Cardholder Name: | All information will remain confidential. |
| | |
| Email Address: | |
| Date: | |
| Credit Card Type: | Masker Card DISC VER Natwork |
| Credit Card Number: | |
| Expiration Date: | |
| Amount to Charge: | |
| I agree that I will pay for this purchase in | rge the agreed amount listed above to my credit card provided herein. accordance with the issuing bank cardholder agreement. |
| Signature: | |