Indiana Land Title Association

Indiana Title Professional (ITP) Designation

Application
Application Introduction

Welcome to ILTA’s Title Professional (“ITP”) Designation Program. There are two paths toward the designation – Examination and Closing. You have the option to obtain your designation in either category or go through all the coursework and obtain your designation in both categories. If you are new to the program, please visit www.indianalandtitle.org for complete details and learn how to qualify for the ITP Designation.

Please fully read and complete each section.

This application may be submitted at any time during the year. Applications are reviewed by the ILTA Board of Governors at their regularly scheduled meetings (even moths of the calendar). Once awarded, the ITP designation begins immediately and is good for three (3) years. The designation expires on December 31st of the third year following the year of designation. (Example: If the ITP designation is awarded any time in 2015, the designation will expire on December 31, 2018, if not renewed). Subsequent renewal cycles will be exactly three years in length (a renewal awarded for the December 31, 2018 expiration date will result in a new expiration date of December 31, 2021). Renewal applications must be submitted by October 31st of the renewal year to allow time for review and processing.

All qualifying employment experience and professional development activities must be completed at the time the application is submitted. Industry (employment) experience may have been completed over the twenty-five (25) year period prior to the application, BUT please note that participation, attendance, industry compliance and educational activities must have been completed during the three (3) years immediately preceding the application. All committee and leadership positions qualify.

*Receipt of your application will be acknowledged within two business days. The information you provide in this application will be kept confidential.*

Application Checklist

Please initial each page, sign or initial where requested, and tally your ITP Points as you proceed. Before sending your application, please indicate you have included the following required items by checking each line:

- _____Signed Application Declaration & Release
- _____Completing the Application
- _____A letter confirming industry experience from an owner/manager of your current employer or a representative from the title industry with whom you work (Underwriter, Lender, Realtor, etc.)
- _____A copy of your current Indiana title insurance producer license
- _____The non-refundable application fee of $75
Application Declaration & Release

I, _________________________ hereby submit this application for the Designation of Title Professional, offered by the Indiana Land Title Association (“ILTA”), in accordance with and subject to the applicable standards, rules, policies and procedures of the Title Professional Designation Program (the “Program”). I understand that ILTA will use reasonable efforts to keep the information in its possession confidential. I understand that ILTA reserves the right to verify any or all of the information associated with this application, and that providing false, misleading, inaccurate, or incomplete information or otherwise violating the rules governing the Program may constitute grounds for the rejection of this application, revocation of the designation, or other appropriate disciplinary action.

I understand ILTA reserves the right to modify or alter at any time the standards and any rules, policies or procedures in connection with the Program. I understand and agree that ILTA owns all rights, title and interest in and to all names, trademarks, logos, applications, and other materials related to the Program. I agree that I shall only use intellectual property of ILTA in connection with my participation in the Program and in accordance with ILTA’s policies, and agree to immediately cease using and return such intellectual property upon expiration, suspension, or termination of my designation. I do hereby attest to the accuracy and validity of, and assume full responsibility for, the content of the application and all materials and information used by me in support of the application.

In consideration of my application to and participation in this Program, I do hereby release, discharge, and hold harmless, individually and collectively: ILTA and its officers, directors, employees, committee members, members, subsidiaries, agents, successors, and assigns; from any and all liabilities that may arise, directly or indirectly, now or in the future, by reason of or in connection with, any decision, action or omission relating to this application, the failure to grant the designation, the revocation of designation, or the designation standards. I hereby authorize ILTA to make inquiries to the identified persons or entities listed on the application form, so as to verify the information on my application and authorize any persons or entities contacted by ILTA to respond to these inquiries and provide copies of any relevant and non-confidential information to ILTA. I further authorize ILTA to provide a copy of this Declaration and Release to those entities contacted in connection with this application, should it be requested.

I have read this application and associated materials and understand and agree to abide and be bound by the terms and conditions contained herein, and by all current and future policies, procedures, rules, and regulations of ILTA.

I understand and agree that, should I receive designation under the Program, that I have met the Program’s requirements for designation, but that ILTA makes no representations, warranties or guarantees as to, and has and assumes no responsibility for the proper performance of land title services, including but not limited to the transfer of real property, and related services, by me. I further understand that neither ILTA, nor the designation itself, guarantees or warrants anything beyond my ability to meet the particular standards and criteria under the Program. I understand and agree that ILTA makes no claims, warranties, guarantees, or promises regarding the content or performance of any designee, and I agree not to misrepresent my designation status and its meaning. I further understand and agree that, upon designation, if I fall out of compliance with any of ILTA’s standards during my designation period, I must immediately notify ILTA. Upon ILTA’s receipt of such notice, I will be given a
limited amount of time (to be specified by ILTA) to correct the source of my noncompliance and remain in good standing. I understand that failure to notify ILTA under such circumstances, or to correct the problem within the allotted amount of time, could result in suspension or revocation of my designation.

I am applying for the following designation:  

__________ ITP – Examination

__________ ITP – Closing

Applicant Signature: ________________________________________________

Applicant Name: ___________________________________________________
(please print)

Date: ____________________________________________________________
Application Overview

This application consists of ten sections, five of which allow you to earn ITP Points towards the ITP designation. Please complete the point values for each line item as you proceed. If you have questions about the number of ITP Points allowed, please refer to the instructions in each section or contact Kathy Hulbert at Kathy@indianalandtitle.org. You will need a minimum of 100 total ITP Points to qualify for consideration.

Information & Prerequisites
• Section 1: Applicant Information
• Section 2: Industry & Compliance Prerequisites
• Section 3: Training Prerequisites

Requesting ITP OR ICP Points
• Section 4: Industry Experience (worth a maximum of 25 ITP Points)
• Section 5: Attendance Record (worth a maximum of 25 ITP Points)
• Section 6: ILTA Involvement (worth a maximum of 25 ITP Points)
• Section 7: Involvement with Other Professional Organizations Related to the Land Title Industry (worth a maximum of 10 ITP Points)
• Section 8: Education and Training (worth a maximum of 50 ITP Points)

Review & Summary
• Section 9: ITP Points Calculation
• Section 10: Professional Qualifications, Disclosure, and Attestation
Section 1: Applicant Information

Full Name: ____________________________________________

Title of Present Position: _______________________________________

Business Name: ____________________________________________

Business Street Address: _______________________________________

Business City/State/Zip: _______________________________________

Business Email Address: _______________________________________

Business Telephone: _________________________________________

Home Street Address: _________________________________________

Home City/State/Zip: _________________________________________

Home Email Address: _________________________________________
Section 2: Industry & Compliance Prerequisites
Please confirm your compliance with each statement by checking where indicated.

_____ I am currently engaged in or associated with the land title industry.

_____ I have a minimum of three (3) years of experience engaged in or associated with the land title industry and have attached a letter confirming my industry experience from either an owner/manager of my current employer or a representative from the title industry with whom I work.

_____ I meet the licensing requirements in each state where I physically conduct business and have attached a copy of my current license(s) related to the land title industry.

_____ My license has never been suspended or revoked in this state or any other state without later being reinstated in that same state.

_____ I have never had a license application or renewal application denied in this state or any other state without later being approved in that same state.

_____ I am a member of ILTA or employed by a member company.

_____ I am a member of ALTA’s Title Action Network. Visit http://www.ALTA.org/tan/ for more information.
Section 3: Training Prerequisites
Please attach a copy of your active Indiana title insurance producer license to this application. A printout verification of your license being active and in good standing with the IDOI is acceptable. Visit www.sircon.com for this information.
Section 4: Industry Experience
(This section is worth a maximum of 25 ITP Points).
Please list your industry experience in the spaces provided below. If you need more space, you may copy this page. Begin with your current position and work backwards chronologically. Two (2) ITP Points per year of experience may be requested, up to the maximum of twenty-five (25) ITP Points for this section.

Employer: ______________________________________________________
City, ST: ______________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Employer: ______________________________________________________
City, ST: ______________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Employer: ______________________________________________________
City, ST: ______________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Employer: ______________________________________________________
City, ST: ______________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

If you need more space, please make a copy of this page.

Total points on this page ________
Section 5: ILTA Attendance Record
(This section is worth a maximum of 25 ITP Points).

• Applicants shall provide a record of ILTA meeting attendance in the three (3) years immediately preceding the application: Meetings may include ILTA Annual Convention (4 ITP Points), ILTA Super Seminar (3 ITP Points), ILTA Title Leadership Conference (3 ITP Points), ILTA Lobby Day (2 ITP Points), ILTAOnline.org classes (2 ITP Points per class) or an in-person ILTA seminar (2 ITP Points).

• Applicants shall provide a record of an ILTA association meeting such as the Annual Business Meeting, any Special Meetings called pursuant to the ILTA Bylaws, ILTA Agents or Underwriters Section meetings or ILTA Standing Committee meetings attendance in the three (3) years immediately preceding the application. One (1) ITP Point per day (or portion thereof) of attendance will be awarded.

Meeting: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Meeting: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Meeting: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Meeting: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Meeting: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Meeting: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Meeting: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

If you need more space, please make a copy of this page.

Total points on this page ________
Section 6: ILTA Involvement
(This section is worth a maximum of 25 ITP Points).
Board of Governors/Volunteer/Leader
Please list ILTA leadership or committee service roles held in reverse chronological order. One (1) ITP Point per year of service may be requested as a volunteer. Two (2) ITP Points per year of service as a member of the ILTA Board of Governors may be requested.

ILT Board of Governors Member, Committee, or Committee Chair:
___________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

ILT Board of Governors Member, Committee, or Committee Chair:
___________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

ILT Board of Governors Member, Committee, or Committee Chair:
___________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

ILT Board of Governors Member, Committee, or Committee Chair:
___________________________________________________
Position: ______________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

If you need more space, please make a copy of this page.

Total points on this page _______
**Section 6 Continued**

**Presenter**
Please list ILTA presentations (as presenter, moderator, panelist, etc.) given during the five (5) years immediately preceding this application in reverse chronological order. *One (1) ITP Point per class, regardless of length, may be requested.*

Session Name: ______________________________________________________
ILTA Meeting: ______________________________________________________
Date: ______________ Points: ______

Session Name: ______________________________________________________
ILTA Meeting: ______________________________________________________
Date: ______________ Points: ______

Session Name: ______________________________________________________
ILTA Meeting: ______________________________________________________
Date: ______________ Points: ______

**Author**
Please list ILTA authorships during the five (5) years immediately preceding this application in reverse chronological order. *One (1) ITP Point per article or publication, regardless of length, may be requested.*

Article Name: ______________________________________________________
ILTA Publication: ___________________________________________________
Date: ______________ Points: ______

Article Name: ______________________________________________________
ILTA Publication: ___________________________________________________
Date: ______________ Points: ______

Article Name: ______________________________________________________
ILTA Publication: ___________________________________________________
Date: ______________ Points: ______

*If you need more space, please make a copy of this page.*

**Total points on this page**

_______
Section 7: Involvement with Other Professional Organizations Related to the Land Title Industry
(This section is worth a maximum of 10 ITP Points).
Other professional organizations related to the land title industry may include, but are not limited to Escrow, Bar, Realtor®, Lender, and Recorder organizations.

Volunteer/Leader
Please list other professional organization leadership roles held during the five (5) years immediately preceding this application in reverse chronological order. One (1) ITP Point per year of service may be requested.

Organization: ______________________________________________________
Board, Committee, or Task Force: ______________________________________
Position: ____________________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Organization: ______________________________________________________
Board, Committee, or Task Force: ______________________________________
Position: ____________________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

Organization: ______________________________________________________
Board, Committee, or Task Force: ______________________________________
Position: ____________________________________________________________
Start Date: ______________ End Date: ______________ Points: ______

If you need more space, please make a copy of this page.

Total points on this page
_________
**Presenter**
Please list other professional organization presentations given (as presenter, moderator, panelist, etc.) during the five (5) years immediately preceding this application in reverse chronological order. *One (1) ITP Point per class, regardless of length, may be requested.*

Organization: ______________________________________________________

Session Name: __________________________________________________________________________

Meeting: _______________________________________________________________________________

Date: ____________________ Points: ______

Organization: ______________________________________________________

Session Name: __________________________________________________________________________

Meeting: _______________________________________________________________________________

Date: ____________________ Points: ______

Organization: ______________________________________________________

Session Name: __________________________________________________________________________

Meeting: _______________________________________________________________________________

Date: ____________________ Points: ______

**Author**
Please list other professional organization authorships during the five (5) years immediately preceding this application in reverse chronological order. *One (1) ITP Point per article or publication, regardless of length, may be requested.*

Organization: __________________________________________________________________________

Article Name: __________________________________________________________________________

Publication: _____________________________________________________________________________

Date: ____________________ Points: ______

Organization: __________________________________________________________________________

Article Name: __________________________________________________________________________

Publication: _____________________________________________________________________________

Date: ____________________ Points: ______

If you need more space, please make a copy of this page.

**Total points on this page**

_______
Section 8: Education & Training  
(This section is worth a maximum of 50 ITP Points).

Please attach a CE transcript printout showing the completion of the six ITP courses.
ITP Points Calculation

Please total the ITP Points requested in each section of this application. Keep in mind that you will need a minimum of 100 ITP Points to qualify for the designation.

Name:________________________________________

Section 4:  Industry Experience   ____________

Section 5:  ILTA Attendance Record   ____________

Section 6:  ILTA Involvement   ____________

Section 7:  Involvement with Other Professional Organizations   ____________

Section 8:  Education & Training   ____________

TOTAL:   ____________

Mail to:  Indiana Land Title Association
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          Indianapolis, IN 46280