


Chicago Estate Planning Council
SPONSOR FORM

TO: BOARD OF DIRECTORS
CHICAGO ESTATE PLANNING COUNCIL

Date: _____

RE: Sponsor Form for Applicant:

Name: _____

Firm/Organization _____ Email _____ Telephone # _____

Designation (Check one)

ASA CFP ChFC CLU CPA CPWA CTFA CVA J.D. TR Other: _____

If the applicant does not have a designation listed above, please explain why you nonetheless conclude that the applicant's primary occupation is estate planning.

We define estate planning as follows: "The process of arranging, accumulating, and preserving a person's property, so as to gain maximum benefit of the applicable laws relating to the ownership and transfer of property while carrying out the person's own wishes for the disposition of his/her property during life and upon his/her death."

Membership Requirements:

- 1) Currently engaged in estate planning (defined above) as a professional in the fields of law, accounting, life insurance, property & casualty insurance, financial planning, wealth management, trust and estate administration, planned giving, or valuation services;
- 2) has demonstrated a significant commitment to estate planning either by acquiring a recognized credential of his or her profession that enhances his or her ability to provide estate planning services, or by making an equivalent contribution to the profession or to his or her professional development and qualifications;
- 3) has engaged in estate planning as a professional for a minimum of five years for regular membership; or two (2) years for associate membership; and

I am personally acquainted with the above applicant and believe this applicant has sound professional ethics. As a member of the Chicago Estate Planning Council I believe this applicant will be a credit to the Council and will make a responsible contribution to the Council.

Length of time acquainted with applicant: _____ **Is applicant a member of your firm?** _____

Describe your contact with the applicant in estate planning matters: (use separate sheet for additional information)

By signing this sponsorship form, you acknowledge that you believe the applicant possesses the professional expertise and the ethical standards consistent with the purposes of the Council as set forth in the By-Laws.

I am a current CEPC Member and I recommend approval of the above applicant. I am pleased to sponsor the membership, and I believe the applicant will further the purposes of the Council.

Signature of Sponsor

Designation ASA CFP ChFC CLU CPA CPWA CTFA CVA J.D. TR Other: _____

Sponsor's Name (Please Print) _____ Telephone Number _____

Sponsor's Firm _____ Email _____

Return completed application to Chicago Estate Planning Council

info@cepcweb.org