



ISOClaimSearch® Training Request Form

ISO offers online and on-site training for ISO ClaimSearch® users. To request training, either online or at your location, please fill out this form and fax to us at 201-469-4139.

Name:				
Title:				
Company:				
Member Type <i>(check one):</i>	<input type="checkbox"/> Insurer	<input type="checkbox"/> TPA	<input type="checkbox"/> Self Insured	<input type="checkbox"/> Other
Address:				
Address Line 2:				
City:		State:	Zip:	
Phone:				
Fax:				
E-mail:				
Type of Training:	Online <input type="checkbox"/>	On-Site <input type="checkbox"/>	Location: _____	
Description and Size of Staff to Be Trained:				
Specify Products to Be Covered <i>(check appropriate topics):</i>	<input type="checkbox"/> Claims Reporting <input type="checkbox"/> Claims Inquiry <input type="checkbox"/> Decision Net <input type="checkbox"/> Police Reports <input type="checkbox"/> Medical Records <input type="checkbox"/> Criminal Records <input type="checkbox"/> Motor Vehicle Records <input type="checkbox"/> AppendDS	<input type="checkbox"/> Event Data Recorder Service <input type="checkbox"/> ClaimDirector <input type="checkbox"/> VLM/NetMap <i>(specify product)</i> <hr/> <input type="checkbox"/> Reading Management Reports <input type="checkbox"/> Other <i>(specify)</i> <hr/>		