

# Agent Transfer Application

Please submit this form to [channelcontracting@bluecrossmn.com](mailto:channelcontracting@bluecrossmn.com), along with a current copy of your E&O.

AGENT INFORMATION				
<b>Last Name</b>		<b>First</b>		<b>M.I.</b>
<b>Business Address</b>			<b>Suite/Unit#</b>	
<b>City</b>		<b>State</b>	<b>Zip</b>	
<b>Date of Birth</b>	<b>SSN</b>	<b>Current Agency Code</b>	<b>Current Agent Number</b>	
AGENT NEW ADDRESS INFORMATION				
<b>Business Address</b>			<b>Suite/Unit#</b>	
<b>City</b>		<b>State</b>	<b>Zip</b>	
<b>New Business Phone</b>		<b>Agent Mobile Number</b>		
<b>New Business Email</b>		<b>Business Website</b>		
<b>Agent Employment Status</b>				
<b>Choose One:</b> Active Selling Agent <input type="checkbox"/> Servicing Agent <input type="checkbox"/>				
I am an employee of the Blue Cross Agency and receive a W2.				YES <input type="checkbox"/> NO <input type="checkbox"/>
<i>OR</i>				
I am an independent agent and receive a 1099.				YES <input type="checkbox"/> NO <input type="checkbox"/>
If you are an independent Agent, does your business currently hold an Agency License with the State of Minnesota?				YES <input type="checkbox"/> NO <input type="checkbox"/>
I have attached copies of my Agency License or my Certificate of Assumed Name				YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you plan to sell Medicare Products?				YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you speak any languages in addition to English?				YES <input type="checkbox"/> NO <input type="checkbox"/>
<b>If yes, please list:</b>				
NEW AGENCY INFORMATION				
<b>Agency Name</b>			<b>Agency Phone</b>	
<b>Agency Street Address</b>			<b>Suite/Unit #</b>	
<b>City</b>		<b>State</b>	<b>Zip</b>	
<b>Agency Manager Name</b>			<b>Manager Phone</b>	
<b>Agency Manager Email</b>			<b>BCBS Agency Code</b>	
DISCLAIMER AND SIGNATURE				
I hereby authorize Blue Cross and Blue Shield of Minnesota to transfer my appointment to the above listed Agency.				
Signature of Agent: _____ Date: _____				