**To:** ISCM / iCAS

c/o Ms. Amy Brener

Amy Brener, Program Director

**ISCM / iCAS Catastrophe Risk Management Credential Program**

4350 North Fairfax Drive, Suite 250

Arlington, VA 22203

Email: CatCredentials@catmanagers.org

**From:** [NAME]

Sample Insurance Company

Address

Email

Phone

To Whom It May Concern:

I would like to recommend [NAME] for the Certified Specialist in Catastrophe Risk (CSCR) designation via the Experienced Practitioner Pathway. I currently supervise [NAME]/I supervised [NAME] for a period of [X] years while working at [COMPANY]. [NAME] has been in cat modeling roles in the industry since [DATE].

[Include reasons for recommendation of this person to CSCR based on your direct experience supervising this individual.]

Please let me know if you need further information.

Sincerely,

[Signature]

[NAME]

Title