Jennifer Clark

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Professional Summary

Insurance professional with 10+ years of experience seeking to combine industry expertise and academic training in a legal position for mutual benefit. Demonstrated history of handling various types of claims. Adept at investigating and assessing damage, determining liability, developing strategies, and negotiating settlements. Proven ability to accurately evaluate claims while maintaining strong customer service, following company policies and procedures, and adhering to regulatory compliance. Able to conduct research, present ideas clearly through effective writing, and interpret pertinent laws and regulations. Strong ability to carry out directives and excel in high-pressure situations.

Education

- Paralegal Certificate, Center for Advanced Legal Studies, Expected Completion: November 2025
- Bachelor of Science in Business Administration. Southern New Hampshire University, 2021 2023
- Associate of Applied Science in Business Administration, El Centro College, 2012 2014

Paralegal Skills

- Legal Terms
- Due Process
- Interviewing Witnesses
- Investigations
- Fact-Checking
- Research
- Case Briefing
- Claims Analysis
- Claims AdjudicationRecord Keeping/Filing
- Data Control
- Compliance Auditing
- Accounting
- Dispute Resolution
 - De-escalation
- Negotiation
- Time Management
- Leadership
- Collaboration
- Organization

Accreditation, Licensure, and Membership

- Phi Theta Kappa Honor Society, Sigma Tau Chapter Member and Designated Scholar
- The National Society of Leadership and Success Member and Designated Scholar
- Licensed Real Estate Agent in FL and TX
- Licensed Insurance Adjuster in AL, AZ, FL, GA, IN, NC, NV, OR, RI, SC, TX, and UT
- Notary Public, Texas, Commissioned 2013, Expires 2029
- NNA Certified Signing Agent

Professional Experience

Liability Claims Adjuster (Remote)

Frontline Insurance – Lake Mary, FL

Apr 2024 - Sept 2025

- Investigate, evaluate, and resolve third-party liability claims and maintain detailed records of all claim activities.
- Review accident reports, medical records, witness statements, and policy details to ascertain claim circumstances.
- Interview policyholders, claimants, and witnesses and capture recorded statements.
- Analyze fault and determine the policyholder's degree of responsibility.
- Assess the extent of property damage and personal injuries to determine potential compensation.
- Apply relevant insurance laws and regulations related to liability claims.
- Negotiate fair settlements with claimants and attorneys.
- Draft coverage determination letters, Reservation of Rights, and releases.
- Provide timely updates and clear communication to policyholders and claimants throughout the claims process.

Career Break to Provide Care for Family Member

Nov 2023 – Apr 2024

Sr. Litigation Adjuster (Remote)

Hippo Insurance Services – Irving, TX

Jul 2023 – Nov 2023

- Investigated, evaluated, and resolved complex and litigated third-party liability and workers' compensation claims.
- Reviewed incident reports, medical records, and other governing documents to ascertain the degree of liability.
- Established and executed strategies to mitigate indemnity, medical, and allocated loss adjustment expenses.
- Assured appropriate loss and expense reserves were established with documented rationale.
- Selected service vendors to attain/maintain an appropriate balance between billed expense and loss outcome.
- Kept a diary system of claims pending to ensure effectual resolution.
- Drafted coverage determination and Reservation of Rights letters.
- Partnered with SIU and Subrogation units to identify fraud and loss recovery opportunities.
- Interviewed policyholders, claimants, and witnesses and captured recorded statements.

Litigation Adjuster (Remote) Tower Hill Insurance Group – Gainesville, FL Apr 2020 – Jul 2023

- Investigated, evaluated, and resolved complex litigated and high-exposure first-party property damage claims.
- Served as Corporate Representative and worked in partnership with defense counsel to create litigation strategies to resolve lawsuits in an efficient and timely manner.
- Attended claim settlement conferences, arbitration, and mediation.
- Interpreted coverage by applying provisions of policy contracts in compliance with regulatory requirements and internal quality procedures.
- Documented files to establish a record of events and calendared dates and deadlines.
- Maintained and adjusted reserves over the life of litigation to reflect changes in exposure.
- Presented high-level summaries of litigated files and potential trial cases to an executive audience.
- Notified underwriting of undisclosed underwriting risks.

Litigation Specialist Security First Insurance Company – Ormond Beach, FL Apr 2019 – Apr 2020

- Investigated, evaluated, and resolved first-party litigated property damage claims.
- Assessed coverage, liability, and damages.
- Established, maintained, and adjusted reserves over the life of litigation to reflect changes in exposure.
- Exhibited proper judgment and decision-making skills when determining actions to effect claim resolution.
- Attended arbitration, mediation, and trial.
- Communicated concise action plans and presented case strategies to leadership.
- Worked with internal and external professionals and business partners to reach appropriate case resolutions.

Promoted to Team Lead CIS Group – Jacksonville, FL

Sep 2018 - Apr 2019

- Supervised a team of litigation specialists, and provided training, coaching, and instruction for their daily tasks.
- Led 45 and 90-day case status conferences to evaluate and develop litigation strategies.
- Assisted with the preparation and circulation of training materials.
- Partnered with other team leads in developing scorecards and other methods to assess employee performance.
- Collaborated with interdepartmental management and other business leaders to identify areas of improvement.
- Provided performance feedback to team members for skill development and to enhance productivity.
- Managed escalations, file audits, and indemnity/expense reserve authority requests.

Litigation Specialist

Oct 2016 - Sep 2018

- Investigated, evaluated, and resolved first-party litigated property damage claims on behalf of Citizens Property Insurance Corporation.
- Collaborated with defense counsel to create litigation strategies.
- Presented high-level summaries of litigated files and potential trial cases to an executive audience.
- Reviewed and approved pleadings, motions, and evidence to assess admissibility and relevance to lawsuit.
- Served as Corporate Representative on assigned case inventory and case inventory of other Litigation Specialists.
- Maintained a diary system of claim pending and case deadlines.

Independent Claims Adjuster

May 2013 - Oct 2016

Prime Consulting Group – Dallas, TX Pilot Catastrophe Services – Irving, TX Eberl Claims Services – Frederick, MD

- Managed auto, property, and injury claims for State Farm Insurance Company from inception to closure.
- Reviewed incident reports, medical records, and other governing documents to ascertain the degree of liability.
- Conducted thorough examinations to gather evidence and facts and prepared reports of investigation findings.
- Interviewed policyholders, claimants, and witnesses and captured recorded statements.
- Processed claim and expense payments.
- Interpreted and applied policy language to loss situations.
- Drafted coverage determination and Reservation of Rights letters.
- Maintained and adjusted reserves over the life of the file to reflect changes in exposure.
- Maintained a working knowledge of applicable regulatory and jurisdictional requirements.
- Engaged experts and service vendors to establish cause, origin, and degree of exposure.