# Membership Application Form for ACCA Members

All questions to be answered and printed in ink and in block capitals.

CHARTERED INSTITUTE FOR

1. Which type of Membership are you applying for? Associate (ACSI)

CISI Candidate/Membership number (if applicable) \_\_\_\_

ACCA Membership number

Full Member (MCSI)

Please attach a copy of your ACCA membership certificate if possible.

(Details of these and all admission criteria can be found on our website cisi.org/acca)

2. Personal details	3. Work details
Title	Firm name
First name(s)	Job title
Last name	Department
Home address	Firm address
Postcode Tel. (include country and local code) Mobile Email	Postcode Tel. (include country and local code)
Date of birth DD/MM/YYYY Former name(s) if any	Email

## 4. IntegrityMatters

Obtaining a pass in the CISI's IntegrityMatters is a requirement for ACSI/MCSI membership.For more information please go to cisi.org/integritymattersI have passed

I have passed the IntegrityMatters test

l will pass IntegrityMatters to activate my membership  $\Box$ 

5. Communications Preferences Please tell us what information you would like to be contacted about			
Additional Events:	Training Courses Conferences Branch Dinners		
Other:	Research Surveys Jobs Online		
Professional Forums and Interest Groups events in London:			
Bond and Fixed Interest	Compliance 🗌 Corporate Finance 🗌 International Regulation 🗌 Financial Planning 🗌 FinTech 🗌		
Risk 🗌 Wealth Management 🗌 Young Professionals 🗌 Training and Competence 🗌 Paraplanner 🗌 Operations 🗌			
Study:	Qualifications Bulletin 🗌 New Qualifications and Pathways 🗌 Revision Tools 🗌		
Telephone Communications: Membership 🗌 Qualifications 🗌 Events 🗌			
Your Membership:	Membership Upgrades 🗌 CPD, Networking and Social Events 🗌 Online Learning 🗌 Member Survey 🗌		
	The Review Digital Articles 🗌 The Review Print Magazine 🗌 Member Updates and News 🗌		
Membership Directory:	Opt in Membership Directory		
Study: Qualifications Bulletin New Qualifications and Pathways Revision Tools   Telephone Communications: Membership Qualifications Events   Your Membership: Membership Upgrades CPD, Networking and Social Events Online Learning Member Survey   The Review Digital Articles The Review Print Magazine Member Updates and News Image: CPD and the communication of t			

6. Contact information (tick one)				
Correspondence to be delivered to:		Work	Home	
Who will pay annual subscription?	Contostanos	Firm	Self	
If firm, please provide the following information:	Contact name			
Dept:	Cost centre:			
Address (if different from above):				

7. Disciplinary history (tick one)		
I have been convicted of a criminal offence Please note that you do not need to disclose protected convictions that are filtered from a standard and enhanced D I have entered an Individual Voluntary Agreement (IVA) or equivalent agreement with	Yes	No Barring Service (DBS) check.
my creditors or have been adjudged bankrupt or insolvent or compounded with my creditors. I have been subject to disciplinary proceedings by the FCA, other regulator or any professional body within the past five years.	Yes	No 🗌
I have been subject to a disciplinary investigation by my firm that has led to disciplinary action being taken against me.	Yes	No 🗌
Please provide details with your application if you have responded Yes to any of the above.		

## 8. Declaration

- 1. On applying to become a member of the Chartered Institute for Securities & Investment I agree to abide by the Royal Charter, Byelaws, Regulations, and to uphold its high standards as published in its Professional Code (all available from website). Any breach of the Regulations may give rise to disciplinary procedures and termination of my membership
- 2. I am aware that CPD is mandatory for CISI members and agree to undertake CPD on an annual basis meeting the CISI CPD requirements to maintain my membership. I understand non-compliance of the CISI CPD requirements can lead to my membership being suspended.
- 3. If not already achieved, to activate my membership I agree to pass IntegrityMatters. I understand that if not completed within 3 months of joining the CISI my membership will be suspended.
- 4. I know of no reason why I should not become a member

Signature: Da	te DD/MM/YYYY
Name in full:	

#### 9. Payment (Please complete as appropriate)

The Institute has agreed to waive the joining fee for ACCA members. The subscription is payable at the time of application. **Thereafter**, **subscriptions are due annually on 1st April.** The membership fee is payable on a pro-rata basis at any stage of the year. Please ensure that you pay the correct fee for the time of year you are joining.

Pro-Rata Fees 2024/25   Application Period     (April - June)   (July - Sept)   (Oct - Dec)   (Jan - March)     ACSI   £162   £121.50   £81   £202.50*     MCSI   £235   £176.25   £117.50   £293.75*	* Includes fee for the following subscription year	
Total paid Receipt required		
Payment by firm: Firm reference:   I authorise payment to be invoiced to our general account: Image: Imag		
Signed: HR department		
Payment by Card: I wish to pay by card.		
Please contact me or other other		
by telephone/email* to make payment on my behalf.		
Telephone number:		
Email address:		
*If you have selected via email you will receive a payment link from customersupport@cisi.org to complete		
Name:		
Signature:		

### Please post or email this form to:

Membership Department, Chartered Institute for Securities & Investment, 20 Fenchurch Street, London EC3M 3BY **Any questions?** applications@cisi.org / +44 20 7645 0777

The CISI reserves the right to seek independent verification of all the information supplied on this application form as part of the assessment process. The CISI reserves the right to refuse applications where information supplied is found to be false