



CISI APPLICATION FORM FOR CHARTERED WEALTH MANAGER

All questions to be answered and printed in ink and in block capitals. All questions are mandatory unless stated otherwise.

1. PERSONAL DETAILS

a. CISI Membership number :

b. CISI Candidate number:

c. Title:

d. First and middle name(s):

e. Surname:

f. Date of birth:

2. CHARTERED WEALTH MANAGER

If you have met the following criteria you can obtain Chartered Wealth Manager.
You must:

- have the CISI Chartered Wealth Manager Qualification (formerly known as the CISI Masters in Wealth Management)
- be a Chartered Fellow or Chartered Member of the CISI
- have a pass in the CISI IntegrityMatters
- have a pass against the CISI or RDR CPD scheme requirements on the CISI CPD log or that of an accredited firm in your most recent CPD year

For more details on the Chartered Wealth Manager please visit cisi.org/charteredwealthmanager

Print name _____ Date _____

Signature _____ Date _____

For office use only

Date received: _____ Membership No: _____

Date processed: _____ Membership Official Initials: _____

Notes: _____



3. Declaration

1. I have not been adjudged bankrupt or insolvent or compounded with my creditors and I am not currently or have been subject to disciplinary procedures by the FCA, other regulator or any professional body within the past five years.
2. I apply to become a member of the Chartered Institute for Securities & Investment and agree to abide by **the Royal Charter, Bye-laws, 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
3. I agree to maintain competence through CPD as outlined in Annex 3 of the Membership Regulations
4. I agree that my name and company can appear on the CISI register for chartered members
5. I confirm that I am currently working within the Wealth Management sector.

Signature: _____

Name in full: _____

4. Payment (Please complete as appropriate)

The fee is payable at the time of application - £30

Payment by firm:

I authorise payment to be invoiced to our general account:

Print name: _____

Signed: _____

Firm reference:

Payment by cheque:

Cheques should be made payable to:

'Chartered Institute for Securities & Investment' and crossed 'Account Payee only'. Cheque attached

Payment by Card:

I wish to pay by: **American Express/Delta/Eurocard/MasterCard/Maestro/Visa** (Delete as applicable)

Please note: A credit card fee of 2% of the total order price will apply to all purchases made with a credit card. There will be no fee for Visa Debit or Delta cards.

I authorise you to debit my account with the amount of including joining fee where applicable

Card number: Security code.: *

Expiry date: ___/___/___ Maestro/AMEX issue date: ___/___/___ Maestro only issue No: _____

** If you do not wish to send your credit card information via the post, please contact customer support - Telephone +44 20 7645 0777*

Card holder's name: _____

Signature: _____

Please return your application form to:

Chartered Wealth Manager

Chartered Institute for Securities & Investment
20 Fenchurch Street, London EC3M 3BY

or scan and email a copy to:

charteredwealthmanager@cisi.org