



CISI APPLICATION FORM FOR STATEMENT OF PROFESSIONAL STANDING

All questions are mandatory unless stated otherwise. If completing the application form by hand, please note that all questions answered must be printed in ink and in block capitals. Where confirming a statement as correct, please only place a 'X' in the box. Please note that incorrectly completed or ineligible forms will be returned to the applicant for resubmission. Statements of Professional Standing are available only to Retail Investment Advisers.

If the application is incomplete or inaccurate, individuals will now be advised by email if their application cannot be processed and will be given five days to provide the missing information/documentation. Regrettably, if this information is not received by the end of the fifth day, the application will be declined.

1. Which type of SPS Certificate are you applying for?

- a. Initial (I have not previously held an SPS certificate with CISI or any other professional body)
- b. Renewal (Please also tick the appropriate box below)
 - I have previously held an SPS certificate with CISI
 - I have previously held an SPS certificate with another professional body

2. Personal details of adviser

- a. CISI Customer & Membership number: _____ & _____
- b. First name(s): _____
- c. Middle name(s): _____
- d. Surname: _____
- e. Former name(s) if applicable: _____

f. Date of birth: / /

g. Preferred Contact Email: _____

In order to obtain an SPS with the CISI you must be at least an Affiliate member.

4. FCA Specialist Activities

Please tick the relevant boxes below

a. I work within the following specialist area(s):

- Securities (FCA Activities 2 & 12)
- Derivatives (FCA Activities 3 & 13)
- Retail investment products and friendly society tax-exempt policies (FCA Activities 4 & 6)

Details of what activities are covered in each specialist area can be found in the FCA appropriate qualifications tables.

<https://www.handbook.fca.org.uk/handbook/TC/App/4/1.html>

b. Please attach **certified evidence** of your appropriate qualification
(please note, you do not need to attach evidence for CISI qualifications)

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(Initial applications)

Date Qualifications achieved: _____

/ /

6. FCA Requirements and Code of Conduct

- I confirm that I understand, and will fully comply with the FCA COCON requirements
(applicable to Advisers under the SMCR) or the FCA APER requirements (applicable to Appointed Representatives and Sole Traders)
- I confirm that I understand and will comply with the CISI Code of Conduct over the following 12 months.

3. Statement of Professional Standing Information

a. Please provide the below information:

- i. Individual FCA Reference number: _____
- ii. Firms FCA Reference Number: _____
- iii. Firm name: _____
- iv. CISI Firm Number (if known): _____

b. Please tick the statement that is applicable to you:

- I am an Appointed Representative or a Sole Trader
- I work under the SMCR

c. SPS Date (When a date is not chosen by the applicant, the SPS start date will be the date we receive the application or for renewal applications this will be from the date that your SPS has expired.)

I want my SPS to start / /

If there is a gap between your previous SPS certificate and your application please provide a reason for this below (i.e. Statutory leave, career break, change of employment position).

5. CPD Requirements

CPD is a mandatory requirement for advisers but there are exceptions. Please see the CISI guidance at cisi.org/rdr for more Information. If you are applying for a renewal and have opted out of meeting the CPD requirement, please ensure that you have attached a letter from your firm to this application, confirming the dates that you were out of the office on statutory leave.

a. Please tick one of the relevant boxes below:

- I can confirm I have met the 35-hour CPD requirement in full and this is logged on the CISI's CPD system
- I have opted not to meet the CPD requirement with the agreement of my employer as this is my first SPS.
(applicable to initial applicants only)
- I have opted-out of meeting the CPD requirements due to statutory leave, with the agreement of my employer
(applicable to renewal applicants only)

b. CPD Dates

My CPD year closes within 92 days prior to my SPS start date.
(If your CPD year does not end within 92 days prior to your SPS start date, we will realign your CPD year to a date that best suits.)

If you have a CPD year start date which you would prefer please provide this here / /

Office use only - Application Review (Page 1)

- Process
- Issue

7. Disciplinary History

- a. Have you been denied an SPS or had an SPS suspended or withdrawn by another Accredited Body? Yes No
(if this has occurred please provide details of the relevant Accredited Body and the reason provided for the SPS application being denied or the SPS being suspended or withdrawn to standards@cisi.org quoting your name and customer number)
- b. Have you been subject to disciplinary investigation, that has lead to disciplinary actions or sanctions by your firm, a regulator, the CISI, any other Accredited Body or any other organisation that you have not previously declared to the CISI? Yes No
- c. Have you been convicted of a criminal offence? Yes No
(Please note that you do not need to disclose protected convictions that are filtered from a standard and enhanced Disclosure and Barring Service (DBS) check)

8. Declaration *(to be completed by adviser)*

This section must be completed by the adviser for whom an SPS is being applied for. No other persons are permitted to complete this section of the application form.

- I am a Retail Investment Adviser as defined by the FCA and I currently work within the Financial Retail sector.
- I confirm that this application is a true and accurate reflection of my status and competence. I understand that if I am found to have provided the CISI with a false declaration or false information in relation to any aspect of this SPS application then this may result in the SPS not being issued or subsequently withdrawn.
- I understand that if issued with an SPS by the CISI, this is subject to passing a CPD audit if selected.
- I understand that if issued with an SPS, this will remain the property of the CISI and can be withdrawn at any time upon request.
- I agree to inform the CISI immediately if any information related to this application changes.
- I confirm that my 'contact details' and 'profile' in 'my details' section at cisi.org/mycisi are current and correct

By signing the below I confirm that I have read, understood and agreed to the CISI's SPS terms and conditions above, and those available at cisi.org/rdrspapplication.

Print name: _____

Signature: _____

Date: / / _____

9. Firm Verification *(If required by your firm)*

This section needs to be completed by the nominated firm verifier. Under no circumstances should this section be completed by the adviser or anyone other than a CISI-approved nominated verifier.

I confirm that the information submitted by the adviser is a true and accurate reflection after due enquiry and to the best of my and my firm's knowledge:

Print name: _____

Job title: _____

Email address: _____

Signature: _____

Date: / / _____

If your firm does not have an approved verifier, please contact spapplications@cisi.org for further guidance.

10. Future SPS payment

Please place a cross in one of the boxes below:

CISI Members

In future, I wish to pay for my SPS with my CISI membership subscription. In doing so I understand that payment must be made by 31 May on each year, otherwise the CISI will be unable to apply the SPS payment in advance discount

In future, I wish my firm to pay for my SPS with my CISI membership subscription. In doing so I understand that payment must be made by 31 May each year, otherwise the CISI will be unable to apply the SPS payment in advance discount

In future, I (or my firm) wish to continue to pay for my SPS on application

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Process

Issue

