

## EXAM ENTRY FORM - DIPLOMA IN FINANCIAL PLANNING

### REGISTRATION FEE:

The registration fee is a single payment for every candidate taking an exam. Once the fee is paid in respect of a named candidate there is no repeat of this fee required, no matter how many times a candidate takes CISI exams, including other CISI qualifications.

The Registration Fee includes CISI student membership<sup>1</sup>.

### INSTRUCTIONS:

Please tick the items required in the boxes provided. Please fill out your personal details below. Payment can be made by payment card or by firm account.

	Exam Entry	Workbook	Exam Entry / Workbook / elearning (saver price)	1st Choice Exam Date (Note 2)	Exam Centre (Note 2)
Registration fee	<input type="checkbox"/> £55				
1. Financial Planning & Advice	<input type="checkbox"/> £280	<input type="checkbox"/> £84	<input type="checkbox"/> £374	..... / ..... / ..... AM/PM	<input type="text"/>
2. Case Study Material and elearning	<input type="checkbox"/> £100				
Case Study Assessment Fee	<input type="checkbox"/> £156				
Case Study Options – please select one	<input type="checkbox"/> Retirement Planning		<input type="checkbox"/> Estate Planning		

### Eligibility\*

Candidates sitting these exams must have one of the following:

1. RDR-compliant qualification (with gap-fill if necessary)
2. A current and valid SPS

\* Please ensure you send evidence of your eligibility if you have not done this previously. This may be a copy (hard or soft) of your qualification certificate or current statement of professional standing.

### Notes

Please note, it is our policy to publish the names of successful qualification achievers.

Please tick here if you do not wish your name to be published:  Please tick here if you do not wish to receive marketing from the CISI:

You should email your completed booking form to [fpexams@cisi.org](mailto:fpexams@cisi.org)

### PERSONAL DETAILS: Please print in capitals

Surname: (Note 6)  Title:  *eg. Mr/Mrs/Miss/Ms*

Forename(s):

Home address:

Home telephone:  Postcode:

Mobile:  Date of birth:  /  /

### CANDIDATE NUMBER: (Note 3)

### ASSESSMENT FEES: (Note 4)

Employer-sponsored

or self-sponsored

### EMPLOYMENT DETAILS: Please use Company Stamp if possible

Name of firm:

Firm's address:

Position held:

Office telephone:

Email address:

Postcode:

Please indicate with a tick where you would like correspondence to be sent:  Home  Work  Email

