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 1.

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.

<table>
<thead>
<tr>
<th>Exam Entry UK</th>
<th>Exam Entry International</th>
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<tbody>
<tr>
<td>Registration fee</td>
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<tr>
<td>1. Level 6 Advanced Financial Planning</td>
<td>£60</td>
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<tr>
<td>2. Level 7 Financial Plan Case Study</td>
<td>£496</td>
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<td>3. Level 7 Financial Plan re-assessment</td>
<td>£496</td>
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<tr>
<td>4. Level 7 Financial Plan Rapid Resubmission</td>
<td>£496</td>
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</tbody>
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Eligibility*
Candidates sitting these exams must have an RDR-compliant qualification for FCA activities 4 and 6 (with gap-fill if necessary)

* Please ensure you send evidence of your eligibility to fpexams@cisi.org if you have not done this previously. This may be a soft copy of your qualification certificate.

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

Results will be available to the appropriate regulators.

PERSONAL DETAILS: Please print in capitals
Surname: (Note 5)  
Forename(s):  
Home address:  
Home telephone:  
Mobile:  
Date of birth:  

CANDIDATE NUMBER: (Note 2)

ASSESSMENT FEES: (Note 3)
Employer-sponsored or self-sponsored

EMPLOYMENT DETAILS: Please use Company Stamp if possible
Name of firm:  
Firm’s address:  
Postcode:  
Position held:  
Office telephone:  
Email address:  

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

Please photocopy this form to book for more than one candidate. Alternatively visit the CISI website to book online or download a form.
1. STUDENT MEMBERSHIP: For details of the benefits of student membership please visit cisi.org/mgrade
2. CANDIDATE NUMBER: If you have previously taken CISI exams, please insert your candidate number. Otherwise, leave blank.
3. EXAM FEES: VAT is not applicable. If this form is more than 12 months old (see issue date on front, in bottom left hand corner), it is advisable to telephone or consult the website to check that the fees are current. Payment can be made by American Express, Delta, Eurocard, MasterCard, Visa Debit and Visa. Please complete the details below.
4. CHANGE OF ADDRESS: Please notify of any address change promptly via MyCISI or by emailing customersupport@cisi.org
5. CHANGE OF NAME: If you have changed your name since your last exam please send us a copy of the relevant documentation, eg, marriage certificate, marked for the attention of the Data Integrity Executive. Failure to submit the relevant documentation may result in refusal of entry to an exam or incorrect exam certificate being provided.

PAYMENT: Please fill out the appropriate information
Account Firms: Please invoice. Invoice recipient name: ___________________________ Job title: ___________________________
Payment by cheque: Cheques should be made payable to ‘Chartered Institute for Securities & Investment’ and crossed ‘Account Payee only’. □ Cheque attached

Payment Card: I wish to pay by: *American Express/Delta/Eurocard/MasterCard/Maestro/Visa* *Delete as applicable
Please contact ☐ me or ☐ other ___________________________ 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: ___________________________

DECLARATION:
I agree to be bound by the terms and notes specified in this entry form and the Candidate Guidance document.
Candidate's signature: ___________________________ Date: ___________________________
Unsigned forms and forms signed on behalf of candidates are NOT accepted.