

Reference: (CII use only)

# Membership support scheme

# **Important notes:**

Please complete all sections of this form in BLOCK CAPITALS and return to:
CII Customer Service, 3rd Floor, 20
Fenchurch Street, London EC3M 3BY

If you require any assistance or advice when completing this form please call Customer Service on +44 (0)20 8989 8464 or

email customer.serv@cii.co.uk

# **Section A - Personal details**

Long-term ill health

Special circumstances

(Please complete a	ll fields.	Your	name	e sho	uld k	ne ec	nterec	as yo	ou v	vish	it to	apı	pea	r on a	all C	II of	ffici	ial d	ocui	men	ts.)									
Please give your Cl	I/PFS p	ermaı	nent	ident	ity n	umk	er if k	nowi	n (P	IN)											Da	te of	bir	th						
Mr/Mrs/Miss/ Ms/Other							Surr Famil	iame, y nan																						
Forename/ Given name(s)																											$\Box$			
Preferred name																														
(Please enter the n	ame yo	u woı	ıld lil	ke to	be a	ddr	essed	by fo	r all	cor	rresp	one	den	ce)																
Gender	(Please	tick)		Male		F	emale		Pi	efe	r not	to	say				Otl	ner												
Employer's name																											$\perp$			
Tel										E	Ξxt					1	Mok	oile												
Work address																														
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Home address																														
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Address to be used	d for pos	stal co	orres	pond	lence	<b>e</b> (P	lease '	tick)		Но	me			Work	<															
Section B -				_				ır rea	son	for	ann	lvin	a fo	nr sur	nnor	t e	vid	ance	ı ic r	eau	ired :	to si	ınnc	ort v	/OLIR	r anr	olica	ntion	1	
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Bank transfer via Bacs (using the CII account details below an	nd including the required information).
CII account details: HSBC Bank plc, 60 Queen Victoria Street, London EC4N 4TR Account number: 50114723 Sort code: 40-11-60 BIC: HBUKGB4194R IBAN: GB94HBUK40116050114723	
Please include the following information so that we can identify ye	our payment:
Date of submission Amount in sterlin	ng transferred £
Transaction reference number (if applicable)	
<b>Important note:</b> Transfers can take up to two weeks to process, the relevant closing dates. You must include any bank charges in the t	herefore please ensure that you submit this in sufficient time to meet any transfer.
Making your payment:	
By Bacs – once your payment has been made, please email all to revenue.team@cii.co.uk	pages of this completed application form, together with your remittance advice,
Direct Debit	Dunger
If you do not currently pay by Direct Debit and have a UK bank ac paying via monthly Direct Debit at no extra cost.	ccount, you can spread the cost of membership by
If the Insurance Institute of London is your local institute, an addit	cional fee of £3.00 a year is payable.
Instructions to your Bank or Building Society to pay by Direct De	ebit (Please complete all fields)
Name and full postal address of your Bank or Building Society b	pranch
To: The Manager (Bank/Building Society)	Please only complete this Direct Debit instruction if you have a UK bank account
Address	Post only to: CII Customer Service, 3rd Floor, 20 Fenchurch Street, London EC3M 3BY
	Originator's identification no.
Postcode	9 9 6 6 4 5
2. Name(s) of account holder(s)	
3. Bank or Building Society account number 4. Branch sort coc	de 5. Reference number (PIN)
I wish to pay my subscription by monthly Direct Debit payme	ents
I wish to pay my subscription by annual Direct Debit paymen	nts
Signature	Date Date

Banks and Building Societies may decline to accept instructions to pay Direct Debits from some types of accounts.

# The Direct Debit Guarantee:

**Section C - Payment details** 

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit the Chartered Insurance Institute will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request the Chartered Insurance Institute to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by the Chartered Insurance Institute or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when the Chartered Insurance Institute asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

# Section D - Declarations

The Chartered Insurance Institute (CII) is a professional body dedicated to building public trust in the insurance and financial planning professions. Suitability for membership is assessed based on completion of the below declarations. This is part of our commitment to high professional standards.

I have been a member of the CII/PFS for at least one year from the date of this application. In continuing my membership of the CII/PFS, I agree to be immediately bound by the CII's Charter, Bye-laws, Code of Ethics, rules, regulations and requirements of membership. I also agree to be bound by the constitution and Bye-laws of any local institute of which I become a member. Full details of these obligations of membership can be found online at cii.co.uk/memberobligations

Please	tick	the	relevant	box	to	confirm	whether
vou ha	ve:						

you have;	
Been made bankrupt or been subject to an individual $\ \ \ $ Yes voluntary arrangement (or similar procedure) or any judgment debt.	No
Been subject to an adverse judgment of any court (or been charged but not yet tried with) any criminal offence other than a monetary fixed penalty for a motoring offence. Please note, if the conviction is considered spent under the Rehabilitation of Offenders Act you should select 'No'.	No
Been subject to any disciplinary sanctions (or are currently the subject of any investigation) by the CII/PFS or any other professional and/or membership body or regulatory authority.	No
If you have answered 'yes' to any of these questions, please also	

If you have answered 'yes' to any of these questions, please also provide any relevant details on a separate sheet of paper.

Please note that whilst a member of the CII/PFS, you are required to let us know if and when, at any point in the future, your circumstances are such that you would have to answer 'yes' to any of the above.

# **Data protection and privacy**

The CII will ensure that your personal data is processed in line with Data Protection legislation and the CII Data Protection and Privacy Statement (available at cii.co.uk/dataprotection). To process this application, I consent to the CII processing my data.

Use the CII website to update your contact details and preferences, selecting the types of information and services you wish to receive and to opt in or out of mailings: cii.co.uk/mycii

Please note: if you choose not to receive marketing emails, you will still receive transactional communications relating to your membership, qualifications, event bookings and voting rights, as well as important operational notifications relating to the CII. Where applicable, you can choose to receive these by post by logging in to cii.co.uk/mycii and updating your preferences.

Signature	
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#### Privacy and electronic communications regulations

In order to keep you informed in a timely and cost-effective manner, the CII uses email as our principal method of communication. From time to time, we may wish to electronically draw your attention to other CII products and services which are likely to be of interest to you. I consent to receiving marketing communications from the CII by email. 

Yes 
No

To opt out of postal marketing communications from the CII and your local institute please send a request to Customer Service at customer.serv@cii.co.uk

## Sharing your data with local institutes

CII local institutes provide access to a programme of services
including CPD events, training and networking opportunities
designed to support you and complement your CII membership. We
will share your data with your local institute (UK, Channel Islands and
Isle of Man based members only) so they may send you relevant
email communications. I consent to the CII sharing my data with my
local institute. Yes No

# Sharing information with your employer

The CII may receive a request from your employer to provide it with details of your assessment record and accreditation including all attempts and future entries, along with your CII permanent identity number. I consent to the CII sharing this information with my employer. 

Yes 
No

## Your right to cancel

In accordance with The Consumer Contracts (Information, Cancellation and Additional Charges) Regulations 2013 ("the Regulations"), you have a right of cancellation in respect of your membership. This right (subject to the Regulations) expires 14 calendar days from the day on which your membership application is accepted or where written confirmation of your membership is received by you (please note that no refunds will be provided for cancellations made after these specified dates). Reimbursement for any monies paid by you which relate to the cancellation will be sent to you within 14 calendar days of receiving the notice of cancellation. Should you wish to cancel, notice should be sent to CII Customer Service at customer.serv@cii.co.uk

I am aware, that members of this scheme are not eligible to hold or to apply for a Statement of Professional Standing.

I have read all the notes and agree to abide by the rules of this scheme.

Date		

# **Notes**

1. Membership Support Scheme is open to all members, provided they have been a member for at least one year prior to the date of this application. Members wishing to apply for the membership support scheme can submit an application at any time, from when their membership is due until their membership lapses. Support cannot be backdated to previous subscription periods. Members affected during a subscription period must pay the full subscription for that period and the supported members' rate will start at the beginning of the next subscription period unless membership is paid by monthly direct debit, in which case future payments will be adjusted accordingly.

Qualified members are reminded that if they allow their membership to lapse or decide to resign it, they would no longer be entitled to use any designatory letters or Chartered title.

2. Part-time scheme: Open to members that are working part-time for 18 hours or less a week in the insurance or financial planning profession. Evidence required: a letter from your employer confirming your hours, on company letterhead. Qualified members working part-time are still required to undertake CPD, as this forms an important part of our Code of Ethics.

Career break: Open to members that are in full-time care of a dependant or undertaking full-time studies to further an individual's career in the insurance or financial planning profession. Career breaks cannot be considered for overseas travel (i.e. backpacking), or for studies NOT related to an individual's career in insurance or financial planning. Evidence required: a copy of your study enrolment and/or confirmation from your employer, on company letterhead.

Maternity leave or Shared parental leave: Open to members that are on maternity leave or shared parental leave. Evidence required: confirmation from your employer, on company letterhead.

Unemployment/Redundancy: Open to members that are registered unemployed and who are actively seeking employment. Evidence required: a redundancy notice within three months or reasons for unemployment, a job seekers certificate or confirmation from the employment office.

**Ill health:** Open to members that are hospitalised or unable to return to work for a period of six months or more. Evidence required: an up-to-date medical certificate or doctor's letter, indicating as far as possible how long the member will be away from work. In cases of terminal illness all future subscriptions may be waived at the discretion of the management.

**Special circumstances:** Open to members that are having difficulty in maintaining membership subscriptions due to financial hardship or other special circumstances they think should be considered. Evidence required: all relevant details plus supporting evidence of any DWP benefits received.

- 3. Members accepted on this scheme will pay half the annual subscription. Members are required to send in an application form and supporting evidence for each year they wish the scheme to apply. Qualified members joining this scheme will retain the right to continue using their designatory letters and Chartered status and will maintain full membership benefits. Members who are not currently working in insurance or financial planning, are not able to use their designation or Chartered title to indicate to the public or otherwise that they are a practising professional in the industry.
- 4. CII CPD scheme requirements remain in force for support scheme members unless specifically agreed otherwise with the CII. Common extenuating circumstances for a partial or complete CPD exemption include maternity leave, career break (but not for backpacking/travelling), ill health, unemployment/redundancy, financial hardship (in so far as it directly impacts on the ability to keep up to date with development activities) etc. To make an application, contact CII Customer Service.

Please note that where you hold a Statement of Professional Standing, any requested exemption from undertaking CPD must first be cleared with the Financial Conduct Authority where self employed or otherwise via your employer.