

EXEMPTION APPLICATION FORM

(PLEASE USE BLOCK CAPITALS) Please note incomplete forms will be returned



MEMBERSHIP ID (If known)	<input type="text"/>					
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Personal Details

Salutation Mr/ Ms/ Mrs/								
First Name								
Surname								
Maiden Name								
Date of Birth	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female						
Home Address	(Note that due to HEA statutory requirements, you MUST provide your home address & Eircode details here)							
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>								
Eircode								
Telephone	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address								

Details of Non Insurance Institute Qualifications / Examinations

Please note that in order to be eligible for an exemption your qualification must match at least 80% of the syllabus and 70% of the assessment format of a current Insurance Institute module.

In line with other professional bodies, academic qualifications completed more than 10 years ago will not be considered. Please read our full exemption policy before submitting your application - see www.iii.ie/programmes/exemptions

Note that once offered, accepted and paid for, exemptions will be added to your Academic Record and cannot be removed afterwards.

Qualification Held	Awarding Body	Date of Award

Exemption Application Details

Please specify the professional Designation you wish to pursue:

APA <input type="checkbox"/>	Accredited Product Adviser	MDI <input type="checkbox"/>	Management Diploma in Insurance
CIP <input type="checkbox"/>	Certified Insurance Practitioner		

Specify the Module(s) you are seeking an Exemption from:

Module Code	Module Name	Module Code	Module Name
CIP-01 <input type="checkbox"/>	The Nature of Insurance	MDI-01 <input type="checkbox"/>	Insurance and Business Law
CIP-02 <input type="checkbox"/>	Compliance and Advice	MDI-02 <input type="checkbox"/>	Insurance Business Environment
CIP-03 <input type="checkbox"/>	Personal General Insurance	MDI-04 <input type="checkbox"/>	Motor Insurance
CIP-04 <input type="checkbox"/>	Commercial General Insurance	MDI-05 <input type="checkbox"/>	Liability Insurance
CIP-05 <input type="checkbox"/>	Health Insurance & Associated Insurances	MDI-06 <input type="checkbox"/>	Commercial Property and Business Interruption Insurance
CIP-06 <input type="checkbox"/>	Practice of Risk Control and Underwriting	MDI-07 <input type="checkbox"/>	Advanced Claims Management
CIP-07 <input type="checkbox"/>	Practice of Claims and Loss Adjusting	MDI-08 <input type="checkbox"/>	Advanced Underwriting Management
CIP-08 <input type="checkbox"/>	Practice of General Insurance Broking	MDI-09 <input type="checkbox"/>	Advanced Risk Management

