

# APPLICATION FORM: APA / CIP

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



MEMBERSHIP NUMBER (If known)

### Personal Details

Salutation Mr/ Ms/ Mrs/ Other (please state)

First Name

Surname

Maiden Name

Date of Birth   /   /

Gender  Male  Female

Home Address

Telephone

Mobile

Email Address 1\*

Email Address 2\*

\* Please note 2 unique email addresses are required

### Employment Details

Employer

Job Title

Area of Work

Administration/Processing  Finance  Loss Assessing  
 Broking  HR/Training  Risk Management/Surveying  
 Claims  IT/Data  Sales/Marketing  
 Compliance  Loss Adjusting  Underwriting

Work Address

Work Telephone

Address where you wish to receive exam related materials:  Work  Home

**Please note if you select home address, materials will be delivered 9am to 5pm Monday to Friday and will require a signature.**

### Student Details

Place of Birth (County; Country if outside Ireland)

Mother's Maiden Name

If you are a past UCD student please also complete this section

UCD Student Number

UCD Student Start Date  /  /

UCD Student End Date  /  /

### Exam Centres

Centres		Exam Semesters		
Centre	Code	Jan	May	Sep
Cavan	330	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cork	302	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dublin	301	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Galway	304	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Limerick	303	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Sligo	306	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Wexford	310	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Please choose the exam centre of convenience to you.

**Disclaimer:** While every effort will be made by The Insurance Institute to ensure your exam will be available at your preferred exam centre, please note it may be necessary to alter or cancel an exam due to circumstances beyond our control. In the event of a cancellation we will contact you to ensure you can make alternative arrangements.

### Qualification Details

Qualification e.g. Professional Certificate in Insurance (APA), Professional Diploma in Insurance (CIP)

Semester (You wish to sit exams in) Year       Month

Special Case Candidates  
Candidates who have a physical or sensory disability or a specific learning problem (e.g. dyslexia) and who wish to avail of support please indicate here and include copies of supporting documentation with your application

### Exam Details

Centre Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Module Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Exam & Textbook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Repeat Exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Re-Registration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Late Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paper Surcharge <sup>1</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<sup>1</sup> See fees overleaf. Surcharge will not apply to applications made online in the Member Area.

## Data Protection - General Statement

The Insurance Institute respects the right to privacy of members, practitioners, students and visitors. Its activities are compliant with the Data Protection Acts 1988 and 2003. This statement sets out the ways in which personal and sensitive personal data are collected, accessed, used and disclosed.

### To provide the CPD Scheme and examinations in fulfilment of its role under the MCC, The Insurance Institute collects and uses information:

- to facilitate the recording of CPD and examination records for our members
- to facilitate and supervise the accreditation process for CPD
- to facilitate the administration and maintenance of Insurance Institute awarded designations
- to monitor and supervise CPD and examination records
- to perform accounting and other record-keeping functions particularly in relation to membership and fees.
- to enhance or improve your experience on our website
- to keep your information secure
- to provide you with online services

### The information held in The Insurance Institute database is disclosed in the following ways:

- The names of all graduates and grandfathered individuals availing of the iiiCPD Compliance scheme are published on our Register of Compliant Persons. We disclose to regulated firms the details of qualifications obtained and CPD hours completed by their employees, together with such other information as may be necessary to enable the regulated firm to maintain a Register of Accredited Persons, as required by the MCC.
- In accordance with reasonable interest entitlements, we disclose to regulated firms the details of use of online examination supports, registration and attendance at lectures and examination results for their employees, together with such other information as may be necessary to enable the regulated firm to meet MCC requirements. If requested by the Central Bank of Ireland, we disclose such information as it may require in order to discharge its functions under the MCC.
- If your employer funds your membership and / or examination fees, it is automatically entitled to request details of your use of online exam supports, registration and attendance at tuition lectures, examination results and CPD record and we reserve the right to disclose this information.
- We do not disclose to employers or to any third parties any information regarding any physical or mental health issues that are notified to us.
- Members, students and employees are entitled to ask for a copy of all personal data held by The Insurance Institute, and to have it rectified or erased, if it is inaccurate. This does not apply to inaccuracies in such personal data provided by you which can be accessed and amended by you in the secure Member area.

### You may do so by writing to:

The Secretary  
The Insurance Institute of Ireland  
Insurance Centre  
5 Harbourmaster Place  
Dublin 1, IFSC  
D01 E7E8

### The following documents are available for download at [www.iii.ie](http://www.iii.ie)

- Code of Ethics & Conduct
- Customer Service Statement
- Terms Governing Website
- Membership Terms & Conditions

### The following documents are available for download at [www.iii.ie/downloads](http://www.iii.ie/downloads)

- Examination Regulations
- Exemption Policies
- Prospectus

## Disclosure

**Declaration:** I wish to register for the exam(s) (at the centre) on the previous page. I have read and understood the terms and conditions for registration with The Insurance Institute (as set out in the Prospectus and in the exam regulations) and I agree to be bound by these terms and conditions. I consent to The Insurance Institute collecting, using and disclosing my personal data to third parties, including but not limited to its agents, affiliates, other educational bodies, assignees, my employer (past, present and/or future), on its website, in order to comply with its legal, regulatory and compliance obligations.

If your employer is paying for your Insurance Institute examinations and/or your membership fees, they are automatically entitled to see your results and/or details of your CPD activity.

By signing below, you are stating that you have read and agree to abide by the Examination Regulations.

Name (please print)

Signed  Date

## Course Fees 2017 (per Module)

Course Modules	Per MCQ Module	Per Written Module
Exam Entry & Textbook	€320	
Repeat Exam <sup>1</sup>	€170	
Exam Re-Registration <sup>2</sup>	€90	
Late Application <sup>3</sup>	€50	

<sup>1</sup> Repeat Exam – available only for the two exam sittings immediately following the original exam sitting.

<sup>2</sup> Re-Registration – due to absence from exam due to extenuating circumstances supported by independent evidence and submitted to the III within 10 days of the original exam date – please see Prospectus for full details.

<sup>3</sup> Late Application fee is IN ADDITION to the relevant fee shown above.

## How to achieve savings

To avail of reduced exam entry fees, login to the Member Area where exam entry fees are:

Exam Entry & Textbook €295      Repeat Exam €145

## Payment Details

Payment Method  Cash/Cheque/PO  Credit/Debit Card  Sponsored\*

Amount €

Cheque/ PO Number  (Please cross your payment and make payable to 'The Insurance Institute')

Credit / Debit Card  Laser  Mastercard  Visa  Amex

Number

Name

Expiry Date  /  CVV (Last 3 digits on reverse of card)

Employer (Sponsor)

Contact Details

PO Number (if applicable)

\*Sponsorship will be verified by The Insurance Institute before your application is processed.