

# APPLICATION FORM: MDI

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



The  
Insurance  
Institute

MEMBERSHIP ID  
(If known)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

## Personal Details

Salutation Mr/ Ms/ Mrs/

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:  Home  Work

Please note materials will be delivered 9 to 5 Monday to Friday and require a signature.

## Qualification Details

### QUALIFICATION: MDI

Semester (You wish to sit exams in) Year

								Month					
--	--	--	--	--	--	--	--	-------	--	--	--	--	--

## Exam Details

Exam Centre				
Module Code				
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.

## Exam Centres

Centres	Exam Semesters	
	May	Nov
Cavan	✓	✓
Cork	✓	✓
Dublin	✓	✓
Galway	✓	✓
Wexford	✓	✓

Please choose the exam centre of convenience to you.

Should an exam centre not be open due to lack of demand, please state your alternate centre preferences which are also subject to demand:

### Alternate Centre Preferences

1	
2	

**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.

## Additional Assistance

Candidates who have a physical or sensory disability or a specific learning problem (e.g. dyslexia) and who wish to avail of support should contact Member Services, who will advise you how to apply and the supporting documentation required.

