



## Section A – Personal details continued

### Area of work

- |  |  |  |                                       |                                  |
|--|--|--|---------------------------------------|----------------------------------|
| <input type="checkbox"/> Administration/<br>Processing | <input type="checkbox"/> Broking                       | <input type="checkbox"/> Claims/Loss adjusting | <input type="checkbox"/> Compliance   | <input type="checkbox"/> Finance |
| <input type="checkbox"/> HR/Training                   | <input type="checkbox"/> Risk management<br>/Surveying | <input type="checkbox"/> Sales/Marketing       | <input type="checkbox"/> Underwriting | <input type="checkbox"/> Other   |

### Job category

- |  |   |  |  |   |
|--|---|--|--|---|
| <input type="checkbox"/> Board member<br>(CEO, Director) | <input type="checkbox"/> Business owner | <input type="checkbox"/> Middle management<br>(Branch, Office, Dept) | <input type="checkbox"/> Senior management<br>(General, Head of) | <input type="checkbox"/> Supervisory/Controller |
| <input type="checkbox"/> Technician/Co-ordinator         | <input type="checkbox"/> Trainee        | <input type="checkbox"/> Other                                       |  |   |

### Area(s) of specialism (Commercial)

- |  |                                   |                                       |                                      |                                    |
|--|-----------------------------------|---------------------------------------|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Accident and health | <input type="checkbox"/> Aviation | <input type="checkbox"/> Construction | <input type="checkbox"/> Engineering | <input type="checkbox"/> Liability |
| <input type="checkbox"/> Marine              | <input type="checkbox"/> Motor    | <input type="checkbox"/> Property     | <input type="checkbox"/> Travel      | <input type="checkbox"/> Other     |

### (Personal)

- |  |                               |                                |   |                                 |
|--|-------------------------------|--------------------------------|---|---------------------------------|
| <input type="checkbox"/> Accident and health | <input type="checkbox"/> Home | <input type="checkbox"/> Motor | <input type="checkbox"/> Pecuniary loss | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Other               |                               |                                |   |                                 |

## Section B – Eligibility of Fellowship

Once elected, to remain a Fellow you must pay for and remain a CII member.

Make sure you have signed and dated the declarations, and ticked a payment method.

**Fees** – I enclose the payment of £420 election fee.

To comply with the latest Payment Card Industry Data Security Standards (PCI DSS), the CII no longer accepts credit and debit card as a payment method for paper applications. To pay by credit or debit card, please call Customer Service.

If you would like to receive a payment receipt, please tick one of the following delivery options

Email  Post

(If selecting email be sure to provide your email address on the first page of the form)

Make sure you have signed and dated the declarations, and ticked a payment method.

Tick method of payment and, if applicable, complete the Bacs details.

**Bank transfer via Bacs** (using the CII account details below and including the required information).

### CII account details:

HSBC Bank plc, City of London Branch, 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 your payment:

Date of submission       Amount in sterling transferred £

Transaction reference number (if applicable)             PIN

**Important note:** transfers can take up to two weeks to process, therefore please ensure that you submit this in sufficient time to meet any relevant closing dates. You must include any bank charges in the transfer.

### How to place your order:

- **Payment by Bacs** – once your payment has been made please email all pages of this completed application form, together with your remittance advice, to [societies.fas@cii.co.uk](mailto:societies.fas@cii.co.uk)

## Section C - Declarations

I apply to become a Fellow and a member of the Chartered Insurance Institute. I confirm that this application and all accompanying information conforms with the mutual recognition agreement between the Chartered Insurance Institute and Deutsche Versicherungsakademie (DVA) GmbH for election to Fellowship and that all information in this form and any accompanying and supplementary information relating to this application is correct.

In applying to become a member of the CII, 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](http://cii.co.uk/memberobligations)

### Please tick the relevant box to confirm whether you have;

Been made bankrupt or been subject to an individual voluntary arrangement (or similar procedure) or any judgment debt.  Yes  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'.  Yes  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.  Yes  No

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, 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](http://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](http://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](http://cii.co.uk/mycii) and updating your preferences.

### 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](mailto: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](mailto:customer.serv@cii.co.uk)

Signature

Date

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## Section D – Fellowship personal checklist

(Please do not submit your application until you can confirm by ticking all the 'yes' boxes below to indicate that you have met all the Fellowship application criteria.)

### I confirm that:

	Yes	For Office use only
• I am a qualified DVA	<input type="checkbox"/>	<input type="checkbox"/>
• I have signed the declarations	<input type="checkbox"/>	<input type="checkbox"/>
• I have been wholly or mainly engaged or employed in work connected with insurance for at least four years excluding any period spent as a full-time student	<input type="checkbox"/>	<input type="checkbox"/>

Please confirm, by ticking the appropriate boxes, that you have enclosed all the necessary items needed to support your application. You must include everything listed below. Please do not submit your application until you are able to enclose all the supporting documentation.

### I confirm that I have enclosed all of the following:


	Yes	For Office use only
• A completed and signed application form	<input type="checkbox"/>	<input type="checkbox"/>
• Payment details for the debit of £420 (this includes the Fellowship enrolment fee, membership admission and subscription and an administration fee)	<input type="checkbox"/>	<input type="checkbox"/>
• Evidence of your DVA qualification	<input type="checkbox"/>	<input type="checkbox"/>
• Evidence of passing the British Insurance Law course.	<input type="checkbox"/>	<input type="checkbox"/>

#### For Office Use Only

DVA confirmation received

**The Chartered Insurance Institute**  
Fellowship Advisory Service (FAS), Chartered Insurance Institute  
3rd Floor, 20 Fenchurch Street, London, EC3M 3BY

Email: [societies.fas@cii.co.uk](mailto:societies.fas@cii.co.uk)

 Chartered Insurance Institute

 @CIIGroup

[cii.co.uk](http://cii.co.uk)