

Application for Initial CFP® Certification

Applicant must complete this form and return it with the required certification fee so that they are received by FPAS. Incomplete application will not be processed. Application is subject to the certification process.

Use of the CFP®, CERTIFIED FINANCIAL PLANNER™ and CFP marks are strictly prohibited unless issued with valid certificate licence by FPAS.

Official Use only:	Certification Licence No	Date issued	Date of Approval	Payment Processed Date:
Payment Bank Cheque Details	Bank	Cheque no	Cheque date	Amount (S\$)

Please make any corrections necessary:-

My details:-

FPAS Membership No	
Name	
Gender	
NRIC / Passport No	
Home Address	
Mailing Address	
Business Address	
Company Name	
Email Address	
Tel: (H) Tel: (O) Tel: (HP)	

Our records indicate the following:-

In sections 1 and 2, if the following is incorrect, please circle one of the following as apply:

1. Your primary business activity is:

•

Personal Financial Planning	Accounting	Banking
Education	Government	Human Resource
Insurance	Law	Real Estate
Securities	Tax Preparation/Advice	
Other:		

2. Highest Qualification you hold:-

•

O Level	A Level	Diploma	Bachelors	Masters	Doctorate
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In sections 3, 4 and 5, please circle what is applicable to you:-

3. Designations:-

CFA	CPA	ChFC	CLU
Other:			

4. Current Licence(s)

Attorney/Solicitors	CPA	Insurance	Real Estate
Dealer's Representatives	Investment Representatives		
Other:			

5. Current Memberships:

Law Society of Singapore	CPA	ASCLU	ChFC	ICPAS
Other:				

PERSONAL FINANCIAL PLANNING PRACTITIONER'S STATUS

6. Practical experience requirements are an essential part of the CFP® qualification. They complement the education and examination(s) and enable FPAS to measure whether passed finalists have gained sufficient experience in applying the learnt knowledge, skills and techniques to become a CFP® Practitioner.

They also provide FPAS with a basis of assuring society at large that those admitted as a “CFP® Practitioner” are competent.

The practical experience requirements describe the range of practical work experience you need to gain in order to become a CFP® Practitioner.

Experience requirement is defined as the supervision¹, direct support², teaching³, or the personal delivery of all or part of the personal financial planning process to a client⁴. Qualifying experience must be able to be categorized into the six primary elements of the personal financial planning process summarised below:

- Establishing the client-planner relationship
- Gathering client data
- Determining the client's financial status
- Developing and presenting a client-specific financial plan tailored to meet the goals and objectives of the client
- Implementing the financial plan
- Monitoring the financial plan

This experience may be gained in the following areas:

- Accounting
- Banking/Trust
- Portfolio Management
- Estate Planning
- Financial Planning Taxation
- Insurance Planning
- Law
- Retirement/Pension Planning
- Securities/Managed Funds

*If you perform some or all of the functions listed, you are considered to perform the primary element.

¹ All levels of supervision are acceptable if the chain of supervision eventually leads back to the planner.

² Must be directly responsible for information that is provided to the planner/client and have reasonable liability for the client.

³ Credit for teaching is limited to the instruction of the curriculum for CFP® certification in a FPAS Registered Programme. Teaching finance-related classes (for college credit) full-time at any non-FPAS Registered Programme university is given two years worth of experience credit, but the third year of experience must be personal-financial planning experience or teaching the curriculum for CFP® certification courses full-time at a FPAS Registered Programme.

⁴ "Client" denotes a person who engages a practitioner and for whom professional services are rendered. Pro-bono experience is accepted as long as (1) there is a client and (2) you are acting as a financial planning professional who is capable and qualified to offer objective, integrated, and comprehensive financial advice to or for the benefit of individuals to help them achieve their financial objectives using the financial planning process.

Timeliness of Experience

Qualifying work experience can be earned prior to, concurrent with, or subsequent to your education and examination requirements. Experience earned more than 5 years prior to the certification examination, however, will not be accepted. When the experience is earned subsequent to the examination, you must complete the requirement within five years of the date of the successful completion of the examination. **(Note: candidates who qualify through the challenge status must have three years experience earned prior to writing the Certification Examination ie Module 6 of the CFP® Programme).**

Applications for the designation of a CFP® Practitioner must include a Career Profile (a prescribed standard form – see EXP A1) and a structured and detailed Curriculum Vitae.

FPAS reserve the right to conduct interview(s) to determine the suitability of experience disclosed. Decision made thereafter by FPAS is final.




In the event of an application being received with inadequate experience, for whatever reason, recommendations will be given on how to improve your application.

Occasionally, professional organizations, employers and members of the media may request list of persons who meet certain criteria. Unless you advise FPAS in writing that you do not want your name provided in response to such requests, FPAS may, at its discretion, provide this information to these parties. You may request a form for this purpose from FPAS.



DECLARATION AND CERTIFICATION AGREEMENT

1. CERTIFICATION AGREEMENT

- a. I understand that FPAS issues to me a certification to use the marks CFP[®], CERTIFIED FINANCIAL PLANNER[™] and . I further understand that such certification is limited to the fixed period of time indicated on any certification issued to me. At the end of such period, if the certification is not renewed, the certification expires and any right to use the marks will terminate upon expiration of said certification. If I fail to comply with re-certification requirements, I agree to cease use of the marks immediately. I understand that FPAS may relinquish any rights I may have in the use of their marks if I fail to maintain current certification status.
- b. I have read and understand **FPAS' Professional Standards and Code of Ethics** as well as the **Disciplinary Regulations**. I acknowledge that the *Code of Ethics* requires compliance with all rules and policies of FPAS which includes, but is not limited to, Practice Standards and the *Marks Use Guide*. I agree to adhere to the provisions of those documents as they presently exist and as they may be amended from time to time.
- c. I further understand and agree that FPAS has the absolute and unrestricted right to revoke the rights I may have to use its marks CFP[®], CERTIFIED FINANCIAL PLANNER[™] and .
- d. I hereby agree to pay the annual certification fee and fulfill the minimum Continuing Professional Development (CPD) requirements as required by FPAS in order to renew the certification.
- e. In consideration of the certification to be granted to me, I further agree that neither FPAS nor its directors, officers, employees and other acting on its behalf shall be liable to me for actions taken or omitted to be taken, in an official capacity or in the scope of employment, except to the extent such actions or omissions constitute willful misconduct or gross negligence, and I hereby release FPAS and the other persons identified above from an liability for any such actions or omissions.
- f. I agree that I shall promptly report to FPAS the particulars of any use by any person of any certification name or certification mark or set up which might amount to infringement of the marks CFP[®], CERTIFIED FINANCIAL PLANNER[™] and  or to unfair competition or passing off or any claim by any third party that the CFP Marks are invalid or infringe the rights of any person or are open to any other form of attack and provide all necessary information and assistance if FPAS decides that proceedings should be commenced or defended.
- g. I agree to compensate FPAS in full on demand for:
- (i) all claims made by third parties alleging losses or injury as a result of any wrongly or unauthorized use by me of the Certification Marks; and
 - (ii) all other losses or expenses suffered by it as of that use
- unless and except to the extent that any loss, injury or expense arises solely as a result of any act or default on FPAS' part.

2. DECLARATION

- I, _____, represent and warrant that the following representations are both accurate and truthful.
- a. I am not now, nor have I ever been, a defendant or respondent in any criminal, governmental or self-regulatory agency proceeding. True _____ False _____
 - b. I am not now, nor have I ever been, the subject of a governmental or self-regulatory inquiry or investigation. True _____ False _____
 - c. I am not now, nor have I ever been, a defendant in a civil action, which includes, but is not limited, to a lawsuit, arbitration, or mediation, relating to my professional or business conduct. True _____ False _____

I agree that if any of the above representations and warranties are breached, I will indemnify FPAS for all claims, proceedings, liabilities, or damages arising there from, direct or indirect.


If any of the above statements were marked "False", I have set forth the principal facts relating to each incident on a separate attached sheet and included copies of appropriate documentation such as claims, complaints, answers, decisions, settlements, proof of fines, etc.

3. RECOMMENDATION FOR CERTIFICATION

Please supply the name, address, telephone number, and signature of a CFP[®] practitioner, CPA, licensed attorney or employer, who, to the best of her/his knowledge, can attest to your willingness to abide by the policies and procedures of the Financial Planning Association of Singapore (FPAS).

Particulars of Attestor:

Name			
Address			
HP number :		Office Number :	
<input type="checkbox"/> CFP [®] (CFP [®] Certification No. _____) <small>Important note: CFP[®] Practitioner must have valid CFP[®] Licence</small>	<input type="checkbox"/> CPA	<input type="checkbox"/> Licensed Attorney	<input type="checkbox"/> Employer

I, _____ (Attestor), know of no reason why this candidate should not be granted the right to use the CFP[®], CERTIFIED FINANCIAL PLANNER[™] and  marks.

Attestor's Signature

Date

I affirm that I have read carefully and voluntarily agree to the terms of the Declaration and Certification Agreement. Furthermore, I declare that the representations contained in this Declaration and Certification are true and complete.

Applicant Signature/ Date

I/C or Passport number

Payment Details (please complete)							
EPayment				Cheque Payment:			
Reference No : EPaymentID_				Bank :		Cheque Number:	
Transaction Date:				Date of Cheque:			
Fee Payable : please mark the appropriate fee:-							
1 Jan-31 Mar(1 st Qtr)	1 Apr-30 Jun (2 nd Qtr)	1 Jul- 30 Sep (3 rd Qtr)	1 Oct-31 Dec (4 th Qtr)	1 Jan-31 Mar(1 st Qtr)	1 Apr-30 Jun (2 nd Qtr)	1 Jul- 30 Sep (3 rd Qtr)	1 Oct-31 Dec (4 th Qtr)
SGD\$230.00	SGD\$172.50	SGD\$115.00	SGD\$57.50	SGD\$230.00	SGD\$172.50	SGD\$115.00	SGD\$57.50

Career Profile

FORM EXP A1


****application for the designation of a CFP® Practitioner must include a Career Profile (FORMEXP A1) and a structured and detailed Curriculum Vitae.**

Name of Applicant:	
FPAS Membership No:	

Date from	Date To	No. of Months	Company	Business Section (e.g. Banking, Insurance, etc)	Your Position/Title	Title of person you report(ed) to	Job Description
	Total no. of months						

Important Note:

- 1. If any of your employment (e.g. Administrator) does not count as relevant experience, you need only complete the first three columns for that period of employment, i.e. dates (from and to) and the type of work you were doing. You can make copies of this form in situations where details exceed the space given.**
- 2. Please provide structured and detailed Curriculum Vitae.**

CFP®, CERTIFIED FINANCIAL PLANNER™, and  are certification marks owned outside the U.S. by Financial Planning Standards Board Ltd. Financial Planning Association of Singapore is the marks licensing authority for the CFP marks in Singapore, through agreement with FPSB.

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posting in
Singapore only.

**BUSINESS REPLY SERVICE
PERMIT NO. 07375**



FINANCIAL PLANNING ASSOCIATION OF SINGAPORE
146 ROBINSON ROAD #04-02,
SINGAPORE 068909

STEPS FOR EPAYMENT

- Step 1: Log on to <http://www.fpas.org.sg>
- Step 2: Click on the E-Payment icon
- Step 3: Select the Payment Type ie Membership Registration
- Step 4: Enter your User ID and Password
- Step 5: Select the Membership type and confirm the Total Amount payable
- Step 6: Read the Declaration and Disclaimer before selecting the Submit button
- Step 7: Select payment via VISA or MASTERCARD
- Step 8: Enter your payment card details and select the Submit button
- Step 9: Print a reference copy of your transaction
- Step 10: Enclose the reference copy together with this Membership Form