

I wish to apply for practitioner membership of the Institute of Financial Advisers and I declare my intention to work towards General member status of the Institute.

Please indicate which Branch of the Institute you select to belong to (✓ appropriate box); this is generally the closest to your location.

- | | | |
|---|--|-------------------------------------|
| <input type="checkbox"/> AUCKLAND / NORTHLAND | <input type="checkbox"/> HAWKE'S BAY / POVERTY BAY | <input type="checkbox"/> TASMAN |
| <input type="checkbox"/> BAY OF PLENTY | <input type="checkbox"/> OTAGO | <input type="checkbox"/> WAIRARAPA |
| <input type="checkbox"/> CANTERBURY | <input type="checkbox"/> SOUTHLAND | <input type="checkbox"/> WAIKATO |
| <input type="checkbox"/> CENTRAL REGION | <input type="checkbox"/> TARANAKI | <input type="checkbox"/> WELLINGTON |

PERSONAL DETAILS (Please print details clearly)

SURNAME _____ TITLE _____

FIRST NAME/S _____ KNOWN AS _____

COMPANY/ BUSINESS NAME _____

POSITION _____ GROUP AFFILIATION (e.g. AXA, AMP) _____

POSTAL ADDRESS (PO BOX) _____

_____ POST CODE _____

BUS TELEPHONE _____ FAX _____

MOBILE _____ PRIVATE TELEPHONE (optional) _____

EMAIL _____ WEBSITE _____

Please tick if you DO NOT wish to receive email correspondence from the Institute of Financial Advisers.

SIGNATURES REQUIRED (your membership application must be supported by references from one member of the Institute and one external referee). Please note we will contact at least one of your referees.

Member Referee _____ Signed _____

Relationship to applicant _____ Daytime Telephone Number _____

Independent Referee _____ Signed _____

Relationship to applicant _____ Daytime Telephone Number _____

Please indicate which area or areas of advice you are competent to provide advice in:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Budgeting | <input type="checkbox"/> Estate Planning | <input type="checkbox"/> Direct Investments | <input type="checkbox"/> Business Risk |
| <input type="checkbox"/> Business Insurance | <input type="checkbox"/> Financial Planning | <input type="checkbox"/> Mortgages | <input type="checkbox"/> Insurance- Fire & General |
| <input type="checkbox"/> Cash Management | <input type="checkbox"/> Home Equity Release | <input type="checkbox"/> Tax Advice | <input type="checkbox"/> Insurance- Personal Risk |
| <input type="checkbox"/> Debt Management | <input type="checkbox"/> Investments | <input type="checkbox"/> UK Pensions | <input type="checkbox"/> Managed Investment Funds |
| <input type="checkbox"/> KiwiSaver & Retirement Savings | | | |

GENERAL QUESTIONS (Please answer all questions)

- Have you ever been denied, or had suspended or revoked, or is there pending any proceeding to deny, suspend or revoke any license or registration to practice any profession, occupation or vocation Yes No
- Have you ever been refused professional or other indemnity insurance Yes No
- Have you ever been disciplined or dismissed by a professional organisation or employer on ethical or legal grounds Yes No
- Have you, or any firm with which you were associated ever been subject to legal action, reparation or arbitration proceedings relative to performance or lack of performance of duties of a financial nature, dishonesty or fraud Yes No
 - If you answered **YES** to the previous question, and it was a firm with which you were associated, were you an Officer, Director, Shareholder, Owner, Partner or registered principal of the firm Yes No
- Have you ever been convicted of, or pleaded guilty to any criminal convictions, other than minor traffic violations Yes No
- Are you now, or have you ever been bankrupt, whether declared or not Yes No
- Have you ever been a Director, Owner or Manager of a business that has been insolvent Yes No
- Have you ever been an Officer of a company ordered wound up by the Court Yes No
- Are you aware of any matters that may impact upon the Institute's consideration of your application Yes No
- Have you or any firm you have been associated with, ever been refused an agency agreement or had an agency agreement revoked Yes No

If you answered YES to any of the above, please provide details: _____

- Are you, or have you previously been, a member of a professional association/organisation in New Zealand or overseas and had a complaint upheld against you (including the IFA and its forerunner bodies) Yes No

If **yes**, please provide full details:

- Have you previously been declined entry to a professional association/organisation in New Zealand or overseas (including the IFA and its forerunner bodies) Yes No

If **yes**, please provide full details:

- Are you involved in the process of providing personal financial advice e.g. investment advice, insurance advice, financial planning, see Membership Bylaws Definition of "Practitioner Member". Yes No

- Are you ordinarily resident in New Zealand for at least nine months of every year Yes No

WORK HISTORY AND EXPERIENCE

- Is the practice of insurance advising, investment advising and/or financial planning your primary vocation Yes No
- How many years have you worked in the financial services industry _____
- How long have you spent in your present position _____
- Name of current employer _____

List all positions held over the last ten (10) years, beginning with your current position (indicate if self-employed).

DATE(S)	COMPANY	POSITION	DUTIES

EDUCATION

To become a full practitioner Member, one of the two approved education qualifications must be completed.

Vocational Education Track: AdviserLink Certificate in Financial Services (along with the two years mentored experience), or

Academic Education Track: One of the following university diplomas

Massey University: Graduate Diploma in Business Studies (either in Personal Financial Planning or Personal Risk Management)

University of Waikato: Postgraduate Diploma in Personal Financial Planning

Note: Full membership is available once 4 papers of a diploma have been completed along with the two years mentored experience. However, completion of the diploma is a condition for retention of membership.

Provisional Members are required to complete the minimum educational requirements within 2 years. Those taking the diploma are required to complete 4 papers within the two year period and complete the full diploma within 4 years. Extension of these periods may be approved in exceptional circumstances by the Certification Committee (e.g. to cover maternity leave/illness).

Please advise us if you have already completed any of the following educational qualifications:

(Please attach copies of certificates)

Massey University's Diploma in Business Studies endorsed in Personal Financial Planning Yes No

If YES, Date of completion _____

Massey University's Diploma in Business Studies (Personal Risk Management) Yes No

If YES, Date of completion _____

Waikato University's Postgraduate Diploma in Personal Financial Planning Yes No

If YES, Date of completion _____

Adviserlink Certificate in Financial Services Yes No

If YES, Date of completion _____

Please note: For the Institute to record your qualification/pass result, please provide a copy of the certificate(s) or correspondence from the education provider. For partially completed qualifications provide name of course/s and date of completion.

BUSINESS DECLARATIONS

TRUST ACCOUNT (✓ appropriate box)

- I personally handle client monies and I personally operate a trust account, OR I am associated with a Company that handles client monies, and that Company operates a trust account.
- If above ticked, I confirm that the trust account is operated in accordance with the Institute's Code of Ethics (Rule 102f).

OR

- I do not personally handle client monies AND I am not associated with a Company that handles client monies.
-

NOMINEE AND CUSTODIAN ARRANGEMENTS (✓ one option only)

- I personally provide custodial and/or nominee services to clients and fulfill the requirements set out in the Institute's Code of Ethics (Rule 102g) for provision of such service; **OR**
- I am associated with a Company that provides custodial and/or nominee services to clients and fulfill the requirements set out in the Institute's Code of Ethics (Rule 102g) for provision of such service; **OR**
- I do not provide nominee and/or custodial services to clients.
-

MENTOR REQUIREMENTS

The Institute of Financial Advisers' Membership and Certification Bylaws require two years approved experience under the supervision of an Institute of Financial Advisers approved mentor. Details of the mentor process and guidelines for mentors and members are available from our website or from National Office. **You are required to enclose your mentor arrangement form with this application.**

The Code of Ethics, Practice Standards, Constitution, Membership and Certification Bylaws and Disciplinary Bylaws are available on the Institute's website www.ifa.org.nz under [Library : Institute Documents](#). We encourage you to become familiar with these documents. The onus is on you to understand your membership obligations.

DISCLOSURE STATEMENT

A member will ensure that every client or prospective client is provided with a Disclosure Statement at the earliest practical opportunity, and before entering into any engagement. A Disclosure Statement may be provided in written or electronic form. The language must be clear, concise and set out in a manner likely to bring the information to the attention of the client. It must not be mixed with marketing material or any matter that is not helpful to its primary purpose.

The minimum requirements of a Disclosure Statement are set out in the Institute's Practice Standards 100-A. The IFA's Disclosure Statement Template and supporting guidelines documents are available to members when membership has been approved.

CREDIT REPORT

Applicants applying for Practitioner Membership are required to provide a credit report from Veda Advantage (formally Baycorp) as part of their membership application. The report must not be older than three months at the time of receipt by the Institute.

This can be obtained by calling Veda Advantage on 0800 698 332 (MYCREDITINFO) or by going online to www.mycreditfile.co.nz and clicking on the '[Request a copy of your credit file](#)' link, from this page select the [Apply Now](#) option, this will download a [Request For Access To Your Personal Credit File form](#) (PDF).

- The [My Credit File – Free of Charge](#) service will dispatch your report within 10 days and requires proof of identity (driver's license or passport).
 - The [My Credit File Express](#) service will dispatch your report within 1 day at a cost of \$23; this service also requires proof of identity (driver's license or passport).
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GENERAL DECLARATION

- I hereby declare that the statements made in this application and any attachments are true and complete.
- I authorise the investigation of all statements contained herein, and release all parties from all liability or claims for damages with respect to furnishing such information.
- I authorise the Institute to make my name known to Institute members as an applicant for membership.
- I agree to be bound by the Constitution and Bylaws of the Institute, and to advise the Institute in writing if I wish to resign my membership.
- I hereby undertake to comply with the Institute's Code of Ethics, Practice Standards & Rules of Conduct.
- I undertake to complete the education and/or training requirements leading to general membership of the Institute.
- In applying for membership of the Institute I acknowledge that under the terms of the Privacy Act 1993 the information provided in this application will be retained for the Institute's purposes. It is understood that this information may be printed in the Institute's authorised publications and I hereby authorise its use for such purposes. I also accept that my contact details will be available on the Institute's website www.ifa.org.nz.

Signature of Applicant _____

Declared at _____ this _____ day of _____ 2010/2011

APPLICATION PROCESS

Your application for membership will be considered for approval and you will be advised in writing of the outcome. If your application is approved a GST invoice will be issued for the annual membership subscription, payment due on the 20th of the following month. Please note that your membership will take effect from the date of approval.

PAYMENT

Your application must be accompanied by a non-refundable payment of \$200 plus GST (**\$225**). An invoice for your membership subscription will be issued following approval of your membership.

FEES

Application fee	\$ 225 incl GST
Annual Membership subscription (Provisional)	\$ 585 incl GST <i>Fees are pro-rated on a monthly basis</i>
Annual Membership subscription (General)	\$ 775 incl GST <i>Fees are pro-rated on a monthly basis</i>

Please payment method:

- Please find enclosed my cheque for the amount of \$225 incl GST
Please make cheques payable to Institute of Financial Advisers.
- Please charge my credit card for the amount of \$225 incl GST

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<i>Please note payment by AMEX is not available.</i>
Card No.	<input type="text"/>	Exp <input type="text"/> / <input type="text"/>
Name on Card	<input type="text"/>	
Signed	<input type="text"/>	Date <input type="text"/>

GST No. 70 601 897

This application is valid until 30 June 2012

(NOTE: Should your application not proceed before 30 June 2012 your application will fall under the policy as at 1 July 2012)

CHECKLIST

PLEASE ENSURE YOU HAVE ATTACHED THE FOLLOWING:

- Application fee of \$225 (GST inclusive)
- Credit Report from Veda Advantage (formally Baycorp)
- Mentor Arrangement Form
- Copy of relevant education certificates
- Any other relevant documents