

# Bailiwick of Guernsey Statement of Professional Standing (GsySPS) Application Form.

Please save a copy of this form to your computer and complete it on-screen before emailing it to [sps@libf.ac.uk](mailto:sps@libf.ac.uk)  
Alternatively, you can print a copy to complete in **BLOCK** capitals and scan and email it to [sps@libf.ac.uk](mailto:sps@libf.ac.uk) or post to  
Student and Customer Services, The London Institute of Banking & Finance, 4-9 Burgate Lane, Canterbury, Kent CT1 2XJ United Kingdom

## YOUR DETAILS

Membership number (if known) \_\_\_\_\_ Title (Mr/Mrs/Ms etc) \_\_\_\_\_  
First name(s) / Given name(s) \_\_\_\_\_  
Last name / Family name \_\_\_\_\_  
Previous name (Please tell us any previous name you have used that would help us link this registration to any other records we may hold for you)  
\_\_\_\_\_  
Date of birth\* (DD/MM/YYYY) \_\_\_\_\_ Gender Male  Female   
\*A date of birth is compulsory to activate your online account.

## CONTACT DETAILS

Email address\* \_\_\_\_\_  
Please provide a telephone number we can use to contact you if necessary:  
Telephone no. \_\_\_\_\_ Mobile no. (if different from Telephone no.) \_\_\_\_\_  
\*Please note that having a valid email address is a compulsory requirement of using LIBF SPS Services.

## EMPLOYMENT

Job title \_\_\_\_\_  
Employer / business name \_\_\_\_\_  
Licensee name \_\_\_\_\_ Licensee address \_\_\_\_\_  
\_\_\_\_\_

## ADDRESS DETAILS

Business address \_\_\_\_\_  
\_\_\_\_\_  
Postcode / Zipcode \_\_\_\_\_ Country \_\_\_\_\_  
Home address \_\_\_\_\_  
\_\_\_\_\_  
Postcode / Zipcode \_\_\_\_\_ Country \_\_\_\_\_  
Please indicate which address you would prefer us to use for postal correspondence: Business  Home

## QUALIFICATION DETAILS

Please indicate which of the following approved qualifications you hold:

- Diploma for Financial Advisers (DipFA®)
- Other please state\* \_\_\_\_\_
- Existing SPS \_\_\_\_\_
- If you have answered 'Other' you are required to submit a certified copy of your qualification certificate for your first SPS and, where relevant, evidence that any required Qualification Top Up CPD has been completed and appropriately verified.

Please ensure all copy documents are certified as "true copies of the original" and signed by an appropriate authority.

## PREVIOUS SPS APPLICATIONS

Have you had an application for an SPS rejected by another Accredited Body or held an SPS issued by another Accredited body that has subsequently been withdrawn? Yes  No

If you answered 'yes' please state when this occurred, the reason why your SPS was refused or withdrawn and the Accredited body in question.

\_\_\_\_\_

## USING YOUR PERSONAL INFORMATION

We will use and protect your personal data in accordance with current data protection legislation to process your application and manage the provision of membership and/or CPD services. Further details, including your rights, the disclosure of data to third parties, storage, retention and how to amend your personal data, can be found within our **Privacy Notice**.

## DECLARATION

- I declare that the information contained in this form is true and accurate
- I declare that in the preceding twelve months I have completed a programme of Continuing Professional Development that meets the standards set out by the **GFSC**.
- I agree to abide by The London Institute of Banking & Finance **Code of Ethics**.
- I accept the **Terms and Conditions**.

Signed \_\_\_\_\_ Date \_\_\_\_\_

## SPS PAYMENT INFORMATION

- Member\* £50
- Non-member £100

\* If you are not yet a member but would like to become one you can do so by completing the Membership application section at the end of this form.

Your SPS will be available to download (in PDF format) once your application has been successfully processed and is valid for a period of 12 months.

- Please tick here if you would like a paper copy posted to you at a cost of £15

- I would like to pay by debit/credit card

We will contact you by telephone to take the details of your card. Your SPS cannot be paid by direct debit.

**TOTAL** £ \_\_\_\_\_

## MEMBERSHIP

**Membership** of The London Institute of Banking & Finance provides access to benefits that address the specific needs of the financial and mortgage adviser community. Membership costs can be found on our **membership webpages**.

- I would like to apply for membership of The London Institute of Banking & Finance
- I would like to pay by debit/credit card\*
- I would like to pay monthly installments for the direct debit (please complete the direct debit instruction below)
- I would like to pay annually via direct debit (please complete the direct debit instruction below)

\*If paying by debit/credit card we will contact you by telephone to take the details of your card.

Signed \_\_\_\_\_ Date \_\_\_\_\_

## DIRECT DEBIT INSTRUCTION FOR MEMBERSHIP (UK BANK OR BUILDING SOCIETY ACCOUNTS ONLY)

Name(s) of account holders

\_\_\_\_\_  
\_\_\_\_\_

Bank or building society account number

Branch sort code

-  -

Name and full postal address of your bank or building society

To: The Manager Bank/Building Society

Address

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_



### Instruction to your bank or building society to pay by direct debit

Service User No

Reference

\_\_\_\_\_

#### Instruction to your bank or building society

Please pay The London Institute of Banking & Finance Direct Debits from the account detailed in this instruction subject to the safeguards assured by The Direct Debit Guarantee. I understand that this instruction may remain with The London Institute of Banking & Finance and, if so, details will be passed electronically to my bank/building society.

Signature(s)

\_\_\_\_\_

Date

\_\_\_\_\_

BANKS AND BUILDING SOCIETIES MAY NOT ACCEPT DIRECT DEBIT INSTRUCTIONS FOR SOME TYPES OF ACCOUNT

## THE DIRECT DEBIT GUARANTEE (THIS GUARANTEE SHOULD BE DETACHED AND RETAINED BY THE PAYER)

### The Direct Debit Guarantee

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit The London Institute of Banking & Finance will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request The London Institute of Banking & Finance to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit, by The London Institute of Banking & Finance or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society - If you receive a refund you are not entitled to, you must pay it back when The London Institute of Banking & Finance asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

