

Isle of Man Statement of Professional Standing (IOMSPS) 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
Alternatively, you can print a copy to complete in **BLOCK** capitals and scan and email it to 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

Individual reference 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 _____

FSC VETTED

FSC reference number, if any _____

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 Level 4 qualifications you currently hold:

- Diploma for Financial Advisers (DipFA®) – registered after 1 April 2010
- Diploma for Financial Advisers (DipFA®) – registered before 1 April 2010 plus appropriate qualification 'gap-fill' (see guidance note 4c)
- 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an SPS rejected by another Accredited Body or held an SPS issued by another Accredited body that has subsequently been withdrawn?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 **FSC**
- I have complied with the FSC Fit and proper persons criteria as set out in the FSC Regulated Activity Handbooks.
- I agree to abide by The London Institute of Banking & Finance **Code of Ethics**.
- I accept the **Terms and Conditions**.

Signed _____ Date _____

PAYMENT DETAILS

- Membership* £45 £ _____
- Non-member £85 £ _____

* 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

£12 £ _____

TOTAL £ _____

- I enclose a cheque for the total payable, made payable to The London Institute of Banking & Finance

- I authorise The London Institute of Banking & Finance to debit my Visa / MasterCard / debit card for the total payable

Card number

Expiry date / Valid from /

Issue number (if applicable) Security number*

Signed _____ Date _____

*This is the last 3 digits found on the signature strip on the reverse of your card.

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 £80 per annum.

- I would like to apply for membership of The London Institute of Banking & Finance £80
- I authorise The London Institute of Banking & Finance to debit my Visa / MasterCard / debit card for the total payable

Card number Expiry date / Valid from /

Issue number (if applicable) Security number*

Signed _____ Date _____

- I would like to pay monthly installments of £6.67 x 11 and 1 x £6.63 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)
- I would like to pay by cheque (cheque enclosed)

Signed _____ Date _____

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

Please fill in the form and send to The London Institute of Banking & Finance, 4-9 Burgate Lane, Canterbury, Kent CT1 2XJ



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

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

To: The Manager Bank/Building Society

 Address

 _____ Postcode _____

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.