

APPLICATION FOR STUDENT MEMBERSHIP 2016 - 2017

Student membership is open to those studying full or part-time in the financial services area, and who are not eligible for any other IFA member classes.

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"/> WAIKATO |
| <input type="checkbox"/> CANTERBURY | <input type="checkbox"/> SOUTHLAND | <input type="checkbox"/> WELLINGTON |
| <input type="checkbox"/> CENTRAL REGION | <input type="checkbox"/> TARANAKI | |

PERSONAL DETAILS (Please print details clearly)

SURNAME _____ TITLE _____

FIRST NAME/S _____ KNOWN AS _____

POSTAL ADDRESS (PO BOX) _____

_____ POST CODE _____

TELEPHONE _____ MOBILE _____

EMAIL _____ DATE OF BIRTH _____

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

GENERAL QUESTIONS (Please answer all questions)

- 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 ☐
- Are you aware of any matters that may impact upon the Institute's consideration of your application Yes ☐ No ☐
- Are you ordinarily resident in New Zealand for at least nine months of every year Yes ☐ No ☐
- Are you working/advising in the financial services sector Yes ☐ No ☐

Please advise us if you are studying towards any of the following educational qualifications:
(Please attach copies of certificates)

Course	Completed Yes/ No	Part Completed Details	Date of Completion
National Certificate in Financial Services (Level 5)			
Massey University Diploma in Business Studies endorsed in Financial Planning			
Waikato University Postgraduate Diploma in Personal Financial Planning			
Other Tertiary courses with financial services content			

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.

APPLICATION PROCESS

Your application for membership will be considered for approval and you will be advised in writing of the outcome.

This application form is valid until 30 June 2017

Should your application not proceed before 30 June 2017 your application will fall under the policy as at 1 July 2017.

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 & Rules of Conduct.
- 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 _____ 2016/2017

CHECKLIST

Please ensure you have attached the following:

- ☐ Copy of relevant education certificates
- ☐ Any other relevant documents