

Reference:  
(CII use only)



Please refer to the Notes & Fees for Membership leaflet that accompanies this form.

# SMP Membership Application Form

## Section A – Personal details

(Please complete all fields – it is essential we have your email address as this is our main channel of contact with you)

Please give your CII permanent identity number (PIN) if known

PIN

Mr/Mrs/Miss/Ms  Surname

Forenames  Date of birth

Daytime tel  Mobile

email

For every email address we receive, we will donate 10p towards Trees for Life reforestation programme in the Scottish Highlands. (see note 1)

Employer name

Job title

Work address

Postcode  Country

Home address

Postcode  Country

Address to be used for correspondence  Home  Work

Please tick one box per category

### Type of organisation

- a) **General Insurance**  Insurance company  Broker/Intermediary  Reinsurance company/broker  Loss adjuster/ Loss assessor  
 Bank/Building society  Consultancy  Legal  Lloyds  
 Other
- b) **Mortgage**  Mortgage intermediary/adviser  Network  Packager  Estate Agent  
 Bank  Building Society  Specialist lender  Other
- Area of work**  Advising clients  Underwriting  Finance  Product selling to advisers  
 HR/Training  Compliance  Broking  Claims/Loss adjusting  
 Technical adviser  Mortgages  Risk Management/Surveying  Other  
 Sales/Marketing  Claims  Administration/Processing
- Job category**  Administrative  Technical  Advisory  Supervisory/Controller  
 Middle management (Branch, Office, Dept)  Senior management (General, Head of)  Executive (CEO, Director)  Business owner  
 Other

## Section B – Local/regional options

You will be allocated to a local institute of your choice. Please give your preference below. (see note 3).

I would like to join (where applicable):

You are able to join one faculty for free. Please give your faculty preference here (see note 2)

## Section C – Society of Mortgage Professionals (SMP) membership levels

Please choose from one of the following:

**Member** – I do not currently hold a qualification in Mortgage Advice.

**Certs CII (MP & ER)** – I have completed the Certificate in Mortgage Advice or equivalent plus CF7 and HR1 (Home reversions plans) or ER1.

**Cert CII (MP)** – I have completed the Certificate in Mortgage Advice or equivalent.

## Section D – Fees and payment methods

(Please see Fees section in the Notes and Fees for Membership leaflet for the fees appropriate to your level)

### New/reinstating members

Admission fee (payable by all new and reinstating members)

£36.00

Subscription fee

Insurance Institute of London fee (if applicable)

£3.00

### Existing members

Your current cycle of membership renewal will continue. You have nothing to pay at this stage. You will be charged the appropriate subscription fee at your new level at your next renewal. We will advise you of your monthly payment before we collect any money. There is also an option to pay annually by Direct Debit.

I wish to pay my fees by annual method of payment

– please complete Section E.

### Spread your payments by paying via monthly Direct Debit

It is recommended that all members who have a UK current account should pay their membership by monthly Direct Debit. Please complete the Direct Debit mandate attached in the Notes and Fees for Membership leaflet.

We will advise you of your monthly payment before we collect any money.

## Section E – Annual payment for new/reinstating members

Cash/cheque payable to CII (Please write your PIN if known on the back of the cheque).

Credit/debit card: Please debit my/our account with the total cost of the goods and services ordered on this form.

Type of card (please tick)  VISA  MASTERCARD  DELTA  SWITCH/MAESTRO  SOLO

Valid from\*     Expiry date\*     Issue number\*

Card number\*

\*Please complete according to the information on the card.

Cardholder's name and address if different from overleaf

Cardholder's Signature

Date

## Section F – Declaration

**Declaration:** I work in the Insurance and Financial Services Industry and I confirm that I am eligible to apply for the designatory letters I have specified and hereby apply to become a member of The Chartered Insurance Institute (CII) at the level stated. I agree, if admitted, to abide by the Charter and Bye-Laws and Code of Ethics of the Institute and by the Constitution and Bye-laws of any local institute of which I may become a member. I also agree to commit myself to an annual programme of Continuing Professional Development (only applicable to qualified members). If at any time I cease to be a member of The CII, I undertake to return any certificate of membership.

**Bankruptcy and Individual Voluntary Arrangements:** Have you ever been made bankrupt or been the subject of an individual voluntary arrangement (or any such similar procedure)?  Yes  No  
If yes, please give details on a separate sheet of paper.

**Criminal convictions:** Do you have any convictions for any offence other than a monetary fixed penalty for a motoring offence which are not yet spent under the Rehabilitation of Offenders Act or have you been charged with (but not yet tried with) any offence other than a monetary fixed penalty for a motoring offence?  Yes  No  
If yes, please give details on a separate sheet of paper.

You are required to let the CII know if you are made bankrupt, become the subject of an individual voluntary arrangement (or any such similar procedure) or are convicted of any offence (other than a motoring offence with a monetary fixed penalty) in the future.

### Data Protection and Privacy

The CII is registered under the Data Protection Act 1998 and will ensure that in providing products and services to you, it (and its business associates) will process your personal data fairly. By submitting this application, I consent to the CII processing my data. Full details are included in the CII Data Protection and Privacy statement which is available on the CII's website.

**Examination candidates only:** Where your employer pays for any of your tuition including e-learning, examination entries, course books or membership fees, the CII will upon the employer's request provide your employer with details of your membership status and/or examination record including attempts, unless you tick this box.

### Privacy and Electronic Communications Regulations

We may from time to time wish to draw your attention to other CII products and services which are likely to be of interest to you. The CII will assume that you consent to us using your data in this way, unless you tick the following box.

We may also share your data with third parties who will use this for similar purposes, but will never sell your personal data to third parties. The CII will assume that you consent to us using your data in this way, unless you tick the following box.

**Your right to cancel:** I recognise that in accordance with The Consumer Protection (Distance Selling) Regulations 2000 I have a right of cancellation in respect of Services, listed in this form, which right shall (subject to the Regulations) expire seven working days from the day after the date on which my order for services is accepted by the CII. In the event I wish to cancel I will send notice to Customer Service. I accept that reimbursement for any monies paid by me which relate to the cancellation will be sent to me within 30 days of CII receiving the notice of cancellation.

You must answer the questions on this form truthfully, including the declarations you make. Any information you provide which is misleading or untrue may result in your membership being cancelled. It may also lead to disciplinary or criminal proceedings. If there are any questions or any parts of the declaration which you do not understand then you can refer to the CII website [www.cii.co.uk/explanatorynotes](http://www.cii.co.uk/explanatorynotes) although the CII do not accept any liability for information or clarification given.

Signature

Date

### The Chartered Insurance Institute

CII Customer Service, 42–48 High Road, South Woodford, London E18 2JP.  
Telephone +44 (0) 208 989 8464 Fax +44 (0) 208 530 3052

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