Important notes:

Please complete all sections of this form in BLOCK CAPITALS and please either:

- fax through the forms if paying by credit/debit card on +44 (0)20 8530 3052,
- send with a cheque to The Chartered Insurance Institute, Fellowship Advisory Service (FAS), 42–48 High Road, South Woodford, London, E18 2JP.

If you require any assistance or advice when completing this form please call Customer Service on +44 (0)20 8530 0819 or email societies.fas@cii.co.uk

Enrolment for the Fellowship Programme application form

Section A – Personal details																																	
Have you ever had previous contact with the CII? (Please tick) Yes No																																	
Please give your CII/PFS permanent identity number (PIN) if known																																	
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Section B – Fees and method of payment continued

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Section D — Fellowship plan Please refer to the Fellowship regulations and guidelines when completing your plan. Please complete this form and keep a copy for your reference. Objectives set to reach Fellowship: Target Actual Date enrolled on Fellowship scheme Intended date of submission of BEP for assessment Intended date of completion of major achievement Intended date of completion of Statement of Personal Development Intended date of application for election to Fellowship State how you have tried to ensure that your personal objectives in reaching Fellowship also meet with those of your employer:

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Section E – M	lajor	acl	niev	em	1e r	ıt c	ho	ser	ı to	sup	opo	rt (ele	ctic	n t	0 l	el	l٥١	NS	hip								
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Please note:

- That if your submission contains any company-specific information you should obtain an endorsement of your intended major achievement from your employer.
- In submitting your major achievement you are agreeing, where this is successfully accepted towards Fellowship, for the CII to make this available for public view.

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Signature	Date			