

APPLICATION FORM: For IoB Members ONLY

APA (Commercial General, Personal General, Private Medical Insurance)

for QFA Holders



(PLEASE USE BLOCK CAPITALS) Please note incomplete forms will be returned

Personal Details											
Salutation Mr/ Ms/ Mrs/ Other (please state)											
First Name											
Surname											
Maiden Name											
Date of Birth				/			/				
Gender		<input type="checkbox"/> Male <input type="checkbox"/> Female									
Home Address: <i>(Note that due to HEA statutory requirements, you MUST provide your home address & Eircode details here)</i>											
Eircode											
Telephone											
Mobile				/							
Email Address 1*											
Email Address 2*											
* Please note 2 unique email addresses are required.											

Related Professional Body Details											
Membership & Certificate Numbers											
IOB Membership No.											

Insurance Institute Exam Centres											
Centres & Centre Codes		Exam Semesters									
Centre	Code	Jan	May	Sep							
Following the Covid health crisis and until further notice, all Institute examinations are delivered online and not in physical examination centres.		✓	✓	✓							
		✓	✓	✓							
		✓	✓	✓							
		✓	✓	✓							
		✓	✓	✓							
		✓	✓	✓							
		✓	✓	✓							
		✓	✓	✓							

Please choose the exam centre of convenience to you.

Disclaimer: While every effort will be made by The Insurance Institute to ensure your exam will be available at your preferred exam centre, please note it may be necessary to alter or cancel an exam due to circumstances beyond our control. In the event of a cancellation we will contact you to ensure you can make alternative arrangements.

Employment Details											
Employer											
Job Title											
Area of Work											
<input type="checkbox"/> Administration/Processing <input type="checkbox"/> Finance <input type="checkbox"/> Loss Assessing <input type="checkbox"/> Broking <input type="checkbox"/> HR/Training <input type="checkbox"/> Risk Management/Surveying <input type="checkbox"/> Claims <input type="checkbox"/> IT/Data <input type="checkbox"/> Sales/Marketing <input type="checkbox"/> Compliance <input type="checkbox"/> Loss Adjusting <input type="checkbox"/> Underwriting											
Work Address											
Eircode											
Work Telephone											
Address where you wish to receive exam related materials: <input type="checkbox"/> Home <input type="checkbox"/> Work											
Please note if you select home address, materials will be delivered 9am to 5pm Monday to Friday and will require a signature.											

Exam Details													
Semester (You wish to sit exams in) Year										Month			
Exam Centre		Personal General			Commercial General			Private Medical					
Insurance Module		CIP-03 <input type="checkbox"/>			CIP-04 <input type="checkbox"/>			CIP-05 <input type="checkbox"/>					
Exam & Textbook		Exam Re-Registration			Late Application								
<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>								

Additional Assistance											
Additional Assistance Candidates											
Candidates who have a physical or sensory disability or a specific learning problem (e.g. dyslexia) and who wish to avail of support should contact Member Services, who will advise you how to apply and the supporting documentation required.											
If you have any queries, please contact Member Services: memberservices@iii.ie - 01 645 6670											

ENTRY REQUIREMENTS FORM



Entry Requirements for Access to Insurance Institute APA/CIP Programmes

As you may be joining the Institute in order to participate in our APA and/or CIP programmes, there are specific entry requirements which must be satisfied before you can be admitted onto the programme. Please provide the following information in order for us to assess your eligibility.

1. Are you aged 23 or above on the 1st January in the year of applying for Insurance Institute exams?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, go to Note on English Proficiency
2. For applicants under 23 on 1st January in the year of applying for Insurance Institute exams, please select from the following list, your highest educational qualification (as on the NFAQ Ireland framework):			
• Level 10 / Doctorate	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, go to Note on English Proficiency
• Level 9 / Masters	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Level 8 / Hons Degree	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Level 7 / Degree	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Level 6 / Higher Certificate or Advanced Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Level 5 / (Leaving Certificate with a pass in English and Maths) Applicants aged under 18 must contact the Institute to confirm eligibility first.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

External Qualifications

If your highest qualification was obtained outside Ireland, please refer to the QQI website to identify the Irish equivalent of the qualification you hold.

3. Have you worked in the Insurance Industry/Financial Services Sector for a minimum of 6 months and can this be certified under the Central Bank Minimum Competency Code?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, go to Note on English Proficiency
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Note: English Proficiency

Please note that all lectures, tutorials, and practical work are delivered through English and examinations are in English.

It is vitally important that learners who are not native English speakers hold the required standard to ensure they gain maximum value from their studies.

A level 5 qualification in English is strongly recommended which will allow you to understand, communicate, read, listen and write in English.

Go to
Declaration

Important Notice

If you have **NOT** been able to answer Yes to any of the three questions above, you may still be eligible to be admitted. Please contact Member Services: memberservices@iii.ie - 01 645 6670 - to discuss

YOU MUST COMPLETE THIS DECLARATION AND SEND IT TO THE INSTITUTE BEFORE MAKING CONTACT REGARDING ELIGIBILITY or ENTRY REQUIREMENTS.

DECLARATION

I confirm that the entry requirements information I have provided above are true, complete and accurate and I am aware that I may be required to provide supporting evidence on request.

Signed: _____

Date: _____

Note: Please refer to our Data Protection & Privacy Policy at www.iii.ie/Data-Protection-And-Privacy-Policy and our Membership Terms & Conditions.

Terms and Conditions

Third Parties

The Institute may share my information with its educational partners (e.g. ATU Sligo, as the Awarding Body) and other relevant third parties e.g. examiners, invigilators, lecturers or as required in order to comply with legal, regulatory, statutory or compliance obligations.

If requested by the Central Bank, the Institute may disclose information to assist it for the purposes of discharging its functions under the Minimum Competency Code. We also share your address/contact information with our textbook fulfillment service provider(s).

Employer Sponsorship

I hereby agree that where my employer is sponsoring my exams, the Insurance Institute may share the following information with them to facilitate them in complying with their obligations under the Central Bank's Minimum Competency Code 2017 ("MCC"):

- confirmation of exam registration;
- attendance/non-attendance/deferral of exam;
- exam results (pass or fail only) - except if awarded a Certificate of Excellence for a result of 80% or above.

Please note that we do not disclose to employers any information regarding physical or mental health issues which are notified to us (e.g. for deferral of exams).

Declaration by Institute of Banking Members

I understand that, as a holder of the QFA designation, if I successfully complete the relevant module(s) with the Insurance Institute, I will be entitled to a General Insurance APA designation which will be awarded by and which I will maintain with, my own professional body.

The following documents are available to view at www.iii.ie

- Examination Regulations
- Exemption Policies
- Prospectus
- Data Protection & Privacy Policy

Data Protection and Privacy

1. The Insurance Institute respects the right to privacy of its members.
2. The Insurance Institute processes personal data in accordance with Data Protection legislation and the Institute's Data Protection & Privacy Policy [available at www.iii.ie/Data-Protection-And-Privacy-Policy]
3. When examinations are provided in the online environment, the Institute appoints a third party contractor to invigilate the examinations and to collate the results of multiple choice examination questions. For the purpose of invigilation, it is necessary for the Institute to provide certain personal data to the third party contractor. It is also necessary for the contractor to collect additional personal data from the candidate. If this application concerns an examination to be taken remotely, it is mandatory that you read the Addendum to the Privacy Policy applicable to online examinations [available at - www.iii.ie/Portals/0/Documents/Membership%20Information/data-protection-and-policy-addendum.pdf]. Please confirm that you have read this and give your consent to the collection and processing of this data in accordance with the terms of the Addendum, by ticking the box below:

For the purpose of taking my examination in the online environment, I confirm that I have read the Addendum to the Data Protection and Privacy Policy of the Institute applicable to online examinations and I hereby consent to the processing of my personal data in accordance with the terms of that Addendum

Declaration

I wish to apply for the exam(s) at the Exam Centre(s) I have marked on this form. I hereby confirm that I have read, understood and agree to the terms and conditions set out on this form, the Exam Regulations and Prospectus.

Name (please print)

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Signed

Date / /

Course Fees 2025

Course Modules	Per Written Module
Exam Entry & Textbook	€360
Exam Re-Registration ¹	€180
Extenuating Circumstances ²	€95
Late Application ³	€50
Recheck	€40
Review	€70

¹ Exam Re-Registration - available only for the two exam semesters immediately following the original exam registration.

² Extenuating Circumstances - due to absence from exam due to extenuating circumstances supported by independent evidence and submitted to The Insurance Institute within 10 days of the original exam date - please see Prospectus for full details.

³ Late Application fee is IN ADDITION to the relevant fee shown above.

All Institute fees are non-transferable and non-refundable. Whilst a service registered for may be cancelled (e.g., a membership or exam application), the fee cannot be refunded or transferred once the application has been processed.

Payment Details

Payment Method Cash/Cheque/PO Credit/Debit Card

Amount €

Cheque/PO Number (Please cross your payment and make payable to 'The Insurance Institute')

Credit / Debit Card Laser Mastercard Visa Amex

Number

Name

Expiry Date / CVV (Last 3 digits on reverse of card)

Employer (Sponsor)

Contact Details

Signature of authorised signatory

