

Enrolment form – AFA Designation

Kaplan Education Pty Ltd. ABN 54 089 002 371

SECTION 1 – REQUIRED PERSONAL DETAILS			
Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other _____		Date of birth:
First name:	Last name:		
Email:	Job title:		
Telephone:	(w)	(m)	(h)
Are you an authorised representative/employee of an AFS licensee?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of licensee:			
Are you an AFA member? To be awarded your AFA chartered designation you must be an AFA member.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Company name (must be provided if you enter a Business address):			
Permanent Residential Address		Primary Mailing Address <input type="checkbox"/> Same as residential address	
Street Address	Street Address		
Suburb:	Suburb:		
State:	State:		
Postcode:	Postcode:		
Country:	Country:		

SECTION 2 – DISABILITY SUPPORT SERVICES	
Do you have a disability, impairment or longer term medical condition, which may affect your studies	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please indicate the area(s) of impairment: <input type="checkbox"/> Hearing <input type="checkbox"/> Learning <input type="checkbox"/> Mobility <input type="checkbox"/> Vision <input type="checkbox"/> Medial <input type="checkbox"/> Other	
If yes, would you like someone to receive advice on support services, equipment & facilities that may assist you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please specify:	

SECTION 2 – TERMS OF ENROLMENT	
Your signature below constitutes that you have read and accepted the relevant terms and conditions and refund policy found on our website www.kaplanprofessional.edu.au . If you don't have access to a computer please contact us and we can email you a copy. It is also confirmation that all details provided at the time of enrolment are true and accurate and you agree to notify Kaplan Professional if any details on this enrolment form change.	
Name:	Date:
Signature:	

Please send the completed enrolment form and any supporting documentation via:

EMAIL studentadvice@kaplan.edu.au

MAIL Admissions Department

Level 4, 45 Clarence Street Sydney NSW 2000

APPLICATION ASSISTANCE Contact your Student Adviser or call 1300 135 798 (+612 8248 7611)

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SECTION 3 – PRE-REQUISITES ACKNOWLEDGEMENT

There are pre-requisites for attaining the AFA Chartered Designations. Please see our website www.kaplanprofessional.edu.au for full details.

Please acknowledge that you have reviewed and fulfilled these pre-requisites by ticking this box and include a certified copy of this evidence with your enrolment form

SECTION 4 - AUTOMATIC EXEMPTIONS

Automatic exemptions into AFA subjects apply if you have completed units from the CFP program as list below.

Please ensure you provide certified copies of your certificates and transcripts (copies to be certified by a Justice of the Peace or originals sighted by a Campus AFA staff member) with your enrolment form.

If you have completed	Automatic exemption for the following AFA Subjects
CFP1 FPA Professionalism	AFA4 Professional Conduct & Governance for Financial Advisers
CFP2 Applied Strategies 1, CFP3 Applied Strategies 2 & CFP4 Investment Strategies	AFA3 Advance Advice Solutions

SECTION 5 - DESIGNATION/SUBJECT SELECTION

(Please specify which study period you would like to commence each subject, please see our website for important dates <http://www.kaplanprofessional.edu.au/afa>)

		SELECT STUDY PERIOD	TICK AS REQUIRED
Fellow Chartered Financial Practitioner (FChFP) – Full designation (incl. AFA1, AFA2, AFA3, AFA4)			<input type="checkbox"/> \$4,320
AFA 1	Business Strategy for Financial Advisers		<input type="checkbox"/> \$1,200
AFA 2	Client Experience Strategy		<input type="checkbox"/> \$1,200
AFA 3	Advanced Advice Solutions		<input type="checkbox"/> \$1,200
AFA 4	Professional Conduct & Governance for Financial Advisers		<input type="checkbox"/> \$1,200
Chartered Life Practitioner (ChLP) – Full designation (incl. AFA1, AFA2, AFA3, AFA4)			<input type="checkbox"/> \$4,320
AFA 1	Business Strategy for Financial Advisers		<input type="checkbox"/> \$1,200
AFA 2	Client Experience Strategy		<input type="checkbox"/> \$1,200
AFA 3	Advanced Risk Solutions		<input type="checkbox"/> \$1,200
AFA 4	Professional Conduct & Governance for Financial Advisers		<input type="checkbox"/> \$1,200
Associate Chartered Financial Practitioner (AChFP)			<input type="checkbox"/> \$1,200
AFA 4	Professional Conduct & Governance for Financial Advisers		-
SUB-TOTAL			
Certification Fee (compulsory fee on initial enrolment)			\$ 375*
Prices are valid till 31 December 2017 and GST free.		TOTAL	\$

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SECTION 6 - PAYMENT

Cheque : (Please make cheque payable to Kaplan Education Pty Ltd).

Cheque No

Credit card payment : We take your privacy seriously – Kaplan is unable to accept credit card details via email or in a word/pdf document format. If you wish to make a payment by credit card, please indicate how you would like to pay below.

We will contact you once your invoice is ready to arrange payment over the phone or via your secure online student portal.

I wish to pay by MasterCard Visa AMEX (Additional 2.5% surcharge)

Pay online

Kaplan will email you a copy of your invoice once it is ready to pay online via your student portal.

Pay over the phone

Kaplan will call once your invoice is ready to pay. If the person Kaplan needs to contact is not you, please provide their name and the best contact number to reach them below.

Contact Name

Contact Number

Total Payment

\$

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