

Intermediate Certificate in Personal Finance (ICPF)

Schools and colleges registration form

Please complete this form in **BLOCK** capitals and in full and either fax it back to +44 (0)1227 786030 or post to: Corporate and Academic Relationship Team, **ifs** School of Finance, IFS House, 4-9 Burgate Lane, Canterbury, Kent CT1 2XJ United Kingdom

SCHOOL/COLLEGE CONTACT DETAILS

Examination Officer

Title (eg Mr) _____

First name(s) _____

Last name _____

School/college address _____

Postcode _____ Country _____

Email address _____

Telephone numbers

Daytime _____

Fax _____

Tutor

Title (eg Mr) _____

First name(s) _____

Last name _____

Email address _____

Telephone numbers

Daytime _____

Fax _____

All students will be sent a letter of confirmation, detailing their Username and Password, to access the online study materials. These letters will be sent to the Examination Officer.

ADDITIONAL INFORMATION

Are you intending to deliver this course over: (please tick one box)

One year

Two years

STUDENT DETAILS

Please enter each student's name as they wish it to appear on their certificate:

| Title | First name | Last name | Date of birth |
|-------|------------|-----------|---------------|
| _____ | _____ | _____ | DD / MM / YY |
| _____ | _____ | _____ | DD / MM / YY |
| _____ | _____ | _____ | DD / MM / YY |
| _____ | _____ | _____ | DD / MM / YY |
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| _____ | _____ | _____ | DD / MM / YY |
| _____ | _____ | _____ | DD / MM / YY |

Each student will be registered for the following units:

Unit 1: Personal Financial Encounters

Unit 2: Money Management Solutions

Synoptic Paper: Personal Finance Management

DATA PROTECTION – TO BE SIGNED BY EXAMINATION OFFICER

I undertake and warrant that the above entries are correct and are made in accordance with and subject to the provisions of the Regulations and that candidates are aware of the contents of those Regulations and have agreed to abide by them and are bound by the undertakings and warranties in them.

I confirm that the information given on this form is correct. We will process your data in accordance with the principles of the UK Data Protection Act (1998). By supplying your address, telephone, fax and email details you are giving your consent for us to contact you in any of those ways in connection with this request. We will not give details to third parties except where necessary for the fulfillment of your registration. We will release examination results and details of qualifications gained at the request of your funder, provider of tuition or anyone else who has an interest in your academic progress. When you receive your qualification, the **ifs** School of Finance or related body may publish your award. Completion and submission of this registration form signifies your consent to the processing of this data.

Signed* _____ Date _____

*Please note that all unsigned forms will be returned and will result in a delay in the processing of your registration.