



**CFP^{CM} Certification Examination
 Examination Review Request Form**

Important Note: This request must be submitted to IFPHK within 30 calendar days of the date printed on your result notification letter. Please refer to the CFP^{CM} Certification Examination Handbook for details about the examination review policy before you submit the form.

Personal Particulars

Name : _____
 HKID : _____
 Candidate / Examinee No.: _____
 Mobile No. : _____

Reason for Requesting : _____

Examination Paper(s) for Requesting

Exam Intake (MM/YYYY): _____

(Please put a "✓" in the appropriate box)

- CFP^{CM} Certification Examination (Foundation Level) **HK\$500**
- CFP^{CM} Certification Examination (Level 1) **HK\$500**
- CFP^{CM} Certification Examination (Level 2) **HK\$500**
- Cross Border CFP^{CM} Certification Examination **HK\$500**

Payment Method

Payment by Cheque [Made Payable to **IFPHK Ltd.**]
 Bank: _____ Cheque No.: _____

Payment by Credit Card
 VISA MasterCard

I hereby authorize IFPHK Ltd. to charge HK\$ _____ or, if I have miscalculated the amount, the correct amount payable to my credit card with details below. I understand that IFPHK Ltd. will notify me if I have miscalculated the payable fee after charging my credit card.

Credit Card No. _____ - _____ - _____

Cardholder's Name: _____ Card Expiry Date (MM/YY): _____

Cardholder's Signature: _____ Date : _____

Remarks:

- Kindly complete the form and return it by fax at (852) 2982 7777, or by mail to IFPHK Office.
- An acknowledgement email will be sent to the applicant upon receipt of the application form. The examination review report will be available within 4-6 weeks after the request is received.
- For enquiry, please contact IFPHK at (852) 2982 7888 or by email: exam@ifphk.org

For Office Use				
Date Received	Candidate / Examinee No.	Payment Date	Remarks	Handled by

Mar 2014/IFPHK