



Statement of Result Request Form

Personal Particulars

Name : _____
 HKID : _____
 Membership No. (if any) : _____
 Mobile No. : _____
 Correspondence Email Address : _____

Request for the following examination result record(s)

Examination	Exam Intake (MM/YYYY)	Fee (HK\$)	No. of copy requesting	Amount (HK\$)
QRA Examination		150 per copy		
Postage for collection by Registered Mail (see Collection Method below)	--	30	--	
Total:				

Collection Method

In Person By Registered Mail (HK\$30 will be charged)

Payment Method

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

Payment by Bank Transfer / Deposit

Account Information

Bank Name : HSBC
 Bank Code : 004
 Account Name : The Institute of Financial Planners of Hong Kong Limited
 Account No. : 002-8-414118

(Please attach a copy of transfer / bank-in slip with this application form.)

Remarks:

1. Kindly complete the form and return it by fax at (852) 2982 7777, or by mail to IFPHK Office.
2. An acknowledgement email will be sent to the applicant upon receipt of the application form. IFPHK will normally take 2 weeks to process the application and once the application is successful, IFPHK will send a confirmation email to the applicant.
3. For enquiry, please contact IFPHK at (852) 2982 7888 or by email: exam@ifphk.org

For Office Use				
Ref No:	Date Received	Statement Collection Date	Acknowledge receipt by Applicant	Handled by

Oct 2020/IFPHK



香港財務策劃師學會
 INSTITUTE OF FINANCIAL PLANNERS OF HONG KONG

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