



註冊財務策劃師協會
Society of Registered Financial Planners

Exemption Selection Form

Member Number: _____

PERSONAL PARTICULARS (Typewritten or block capitals)

Title: Dr./Mr./Mrs./Ms/Miss *

Sex: Male/Female *

Surname: _____

Given names: _____

Daytime Tel. No.: _____

Mobile Tel. No.: _____

*Delete where inappropriate

Please tick the box if you wish to apply for exemption.

DIET OF EXAMINATION: June 20__ diet December 20__ diet

Exemption fee	HKD\$
FP 3010 – Financial Planning	\$800 _____
FP 3020 – Insurance Planning	\$800 _____
FP 3030 – Investment Planning	\$800 _____
FP 3040 – Tax Planning	\$800 _____
FP 3050 – Best Practices for Financial Planners	\$800 _____
Total:	

For official use only	
Membership category:	
Student	<input type="checkbox"/>
Associate	<input type="checkbox"/>
Total:	

All above selection are subject to HKRFP Examination Committee's discretion; the Society will inform you the final modules that you need to take for examination in due course.

Signature: _____

Date: _____