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| **Application for Consideration as a Fellow/Associate of the Institute and Faculty of Actuaries (IFoA).** |

**Individual Qualification Recognition**

Subject to the requirements outlined below, the IFoA may recognise your qualification from another actuarial association and award you either IFoA Fellowship or IFoA Associateship.

In order to apply for qualification recognition, you must complete the Application Form and provide the required documentary evidence.

Applications for qualification recognition shall be considered by the IFoA if the following conditions are met:

**Education Requirements:**

Individuals will be considered for admission to Associate/Fellowship of the IFoA if:

* They have qualified as an Associate/Fellow with a ‘recognised actuarial association’. A recognised actuarial association is one which held full membership status of the International Actuarial Association at the time the individual qualified; and

**If qualified after 2005:**

* They have completed a mapping of their qualification syllabus against that of the IFoA, to demonstrate broad equivalence; and
* They can demonstrate a minimum of 3 years’ work experience either pre or post qualification.

**If qualified before 2005:**

* They should be able to demonstrate employment in an actuarial or comparable role with a minimum of 3 years’ work experience, as an alternative to completing a mapping against the IFoA syllabus. This would be evidenced through references from the employer and scrutiny from an FIA to ensure the individual was operating at an appropriate level commensurate with the membership grade they are applying for.

In both cases:

* They can demonstrate that once qualified and practising, they have followed a programme of continuous professional development (“CPD”) and professional skills training; and
* The individual should provide a written statement from the current actuarial association that they are a member of, confirming that they are a member in good standing (including a compliant CPD record) and that the individual has no adverse disciplinary findings against them. In the event of any disciplinary findings, full details will need to be provided.

All applications will need to be supported by a comprehensive and up-to-date CV.

**Application for Consideration as a Fellow/Associate**

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| Title:  |  Mr [ ]  Mrs [ ]  Miss [ ]  Ms [ ]  Dr [ ]  Other [ ]  please specify: |  |
| Gender: |  Male [ ]  Female [ ]  Prefer not to disclose [ ]   |  |
| Forename(s): |  |
| Surname: |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | D | D |  | M | M |  | Y | Y | Y | Y |
| Date of birth: |  |  |  |  |  |  |  |  |  |  |

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| Qualifications (please enter the qualifications to appear on your records: |

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| **Current** residential address: |  |
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| Postal Town:  | County: |
| Country: | Postcode: |
| Telephone Number: |  |
| Personal e-mail address: |

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| **Employment details** -  |
| Company name: |
| Company Address (including department): |
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| Postal Town:  | County: |
| Country: | Postcode: |
| Telephone Number: |  |
| Your company e-mail address: |

Please indicate which address you would like all correspondence sent to: Home [ ]  Office [ ]

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**Education and Qualifications**

**You must complete all parts of this section.**

Please give your full education history with qualifications awarded.

**You must provide proof of all qualifications with your application including transcripts of any degree you may hold.**

**University Education**

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| --- | --- | --- |
| Level:  | Honours Degree [ ]  Ordinary Degree [ ]   | Grade: 1st [ ]  2.1 [ ]  2.2 [ ]  3rd [ ]  |
| University attended: |  |
| Subject studied: |  |
| Date of graduation: |  |
| Level:  | Postgraduate Diploma [ ]  Masters [ ]  Doctorate [ ]  |
| University attended: |
| Subject studied: |
| Date of graduation: |

**Professional Qualifications**

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| Professional association: |  |
| Qualification: |  |
| Date of graduation: |  |
| Professional association: |  |
| Qualification: |  |
| Date of graduation: |  |

**Actuarial Qualifications**

Please give full details of actuarial qualifications obtained, with dates, and particulars of membership of actuarial associations.

Please supply confirmation of membership letter from your current actuarial association with your application confirming that you are a member in good standing (including a compliant CPD record) and that you have no adverse disciplinary findings against you. In the event of any disciplinary findings, full details will need to be provided.

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Confirmation letters or certificates in any language other than English must be accompanied by duly attested English translations.

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| **Actuarial Association**  |  |  |
| (please give full name) |  |  |
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| --- | --- | --- | --- |
|  **Subject** | **IFoA subject this maps to** please provide evidence | **Grade** |  **Date** |
|  |  |  |  |

**Work experience for the last three years**

Please give full details of your work experience with dates.

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| --- | --- | --- | --- |
|  **From** |  **To** | **Employer Details** |  **Details of work experience** |
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**Continuing Professional Development for the past year**

Please give full details of any Continuing Professional Development (CPD), including Professional Skills Training, you have undertaken during the past year with the appropriate dates. You may find the template below helpful in demonstrating your CPD compliance and fulfilment of Professional Skills Training. We will, however, consider such other evidence you submit to us.

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Event** (Please give name of organiser) | **Subject** | **Total Hours** |
|  |  |  |  |

**Professional and Regulatory Requirements**

In addition to the educational requirements outlined above, any individual applying for individual recognition shall be required to make the following declarations before admission to the IFoA.

I declare and confirm that I:

• do not have any concluded findings of misconduct or equivalent against them by any professional body to which they belong or belonged (full details of any such findings to be provided with the application), and

• have not been excluded from a university course or other further education programme because of a finding of misconduct or equivalent against them (full details of any such findings to be provided with the application), and

• do not have any criminal convictions (full details of any such conviction to be provided with the application)

Note: You are not required to declare any concluded finding or criminal conviction which is considered by local law, rule or regulation to be expired, spent or a “protected conviction” (for example as defined by the Rehabilitation of Offenders Act 1974 (Exceptions Order 1975 (as amended) or by the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2013 (as amended)).

In addition to this, individuals are also required to declare and confirm that, they will be bound by the constitutional and regulatory framework of the IFoA, which includes:

* the Actuaries’ Code; and
* the IFoA’s Charter, Byelaws, Rules and Regulations,; and
* the IFoA’s professional standards (including the Actuaries’ Code, Actuarial Profession Standards, the CPD Scheme and, for relevant work within UK Geographic Scope, the FRC’s Technical Actuarial Standards, all as replaced or amended), and.
* the Disciplinary and Capacity for Membership Schemes.

**Applications for individual qualification recognition are subject to the discretion of the IFoA having regard to the documentary evidence of qualification equivalence or employment history produced by the individual. The conditions set by the IFoA above are subject to change by the IFoA.**

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| Signed: | Date: |

**This form should be completed and returned to Membership@actuaries.org.uk**

**How we use your personal data**

**Your privacy matters:** we use the information you provide to stay in contact with you and to maintain our list of members.  You can read more about how we use your personal data here:  <https://www.actuaries.org.uk/privacy-policy>