

SECTION B (EXAMINATION MODULE)

MEMBER NON MEMBER

Risk and Insurance	<input type="checkbox"/>	Business Interruption	<input type="checkbox"/>
Insurance Broking	<input type="checkbox"/>	Estate Planning	<input type="checkbox"/>
Reinsurance Practice	<input type="checkbox"/>	Life Insurance Claims	<input type="checkbox"/>
Risk Management	<input type="checkbox"/>	Life Insurance Practice	<input type="checkbox"/>
Marine and Aviation Insurance	<input type="checkbox"/>	Retirement Planning	<input type="checkbox"/>
Engineering and Construction	<input type="checkbox"/>	Health Insurance	<input type="checkbox"/>
Liability Insurance	<input type="checkbox"/>		

(Please tick one box per category)

Type of organisation

<input type="checkbox"/> Bank/Building Society	<input type="checkbox"/> Broker/Intermediary	<input type="checkbox"/> Insurance Co.	<input type="checkbox"/> Legal
<input type="checkbox"/> Reinsurance Co.	<input type="checkbox"/> Life Assurance Co	<input type="checkbox"/> Funeral Assurance Co.	<input type="checkbox"/> Other

Area of Work

<input type="checkbox"/> Administration	<input type="checkbox"/> Broking	<input type="checkbox"/> Claims/Loss adjusting	<input type="checkbox"/> Finance
<input type="checkbox"/> HR/Training	<input type="checkbox"/> Underwriting	<input type="checkbox"/> Sales/Marketing	<input type="checkbox"/> Other
<input type="checkbox"/> Risk Mgt/Surveying			

Job Category

<input type="checkbox"/> CEO/Director	<input type="checkbox"/> Middle Mgt	<input type="checkbox"/> Senior Mgt	<input type="checkbox"/> Supervisory
<input type="checkbox"/> Trainee	<input type="checkbox"/> Other		

SECTION C (EXAM CENTRE AND DECLARATION)

HARARE	<input type="checkbox"/>	BULAWAYO	<input type="checkbox"/>	GWERU	<input type="checkbox"/>	MASVINGO	<input type="checkbox"/>
MUTARE	<input type="checkbox"/>	MAPUTO	<input type="checkbox"/>	FRANCISTOWN	<input type="checkbox"/>	GABORONE	<input type="checkbox"/>

I understand that this fee is NEITHER refundable NOR Transferable

Signed _____ Date _____

FOR OFFICE USE

Date registered Amount paid

Date study material POSTED COLLECTED