

CHALLENGE STATUS RENEWAL FORM

Registration Details

First Name _____ Middle Name _____ Last Name _____
 FPSB India No. _____ NCFM No. _____

Update Contact Details

Kindly make sure you fill the contact details correctly. FPSB India will send all the important notifications relating to the CFP Certification Program to the details given below.

Email-id 1 _____ Email-id 2 _____
 Mobile Phone _____ Resident No. _____ Business No. _____

Update Current Employment Details

Enter your current employment details the first row and previous employment details.



Nature of Employment (Corporate or Self-employed)	Name of the Organization	Designation	Working Since (Month and Year)
_____	_____	_____	_____

Payment Details

Kindly note payment once made is non-refundable and non-transferable. Candidates opting to pay using Demand Draft need to attach the demand draft while submitting the Form to Education Provider. Candidates need to enroll for Exam 5 separately by paying Rs. 5000/-.

Credit Card

Demand Draft (DD)

Please charge my Credit Card  
 for Rupees Seven Thousand Five Hundred Only (Rs. 7500/-)*

Please find enclosed DD (payable at Mumbai) of Rs. 7500/-
 favouring "Financial Planning Standards Board India"

Card member's name _____

DD Number _____

Card No. _____

DD Date _____

Card Expiry Date _____

City/Branch Name _____

*(Processing Fee of 2.5% will be added for credit card payments) Signature _____

Declaration

I shall submit the following documents to FPSB India within 15 days from today failing which I understand that my application for Challenge Status Renewal will not be considered by FPSB India

- Duly filled Challenge Status Renewal Form
- Demand Draft (if opted for in the Payment Option above)

I certify that the above information provided by me is true and correct to the best of my knowledge, information and belief. I also agree to adhere to FPSB India guidelines and instructions. I accept that all decisions pertaining to the Education, Examination & Certification shall be final and binding on me.

Name _____

Place _____ Date _____

Signature _____