

# CPIB REGISTRATION POLICY

## 2018 IMPORTANT DATES (SELF-STUDY)

SEMESTER	DATES	REGISTRATION DEADLINE	LATE REGISTRATION DEADLINE (+\$50 FEE)	EXAM DATE
Winter	Feb. 5–April 27	January 29	February 16	May 2
Summer	June 4–July 27	May 28	June 15	August 1
Fall	Sept. 10–Nov. 30	August 31	September 21	Dec. 5

## CANCELLATIONS/REFUNDS

Written notice (emails are accepted) must be received in order to be eligible for a refund.

Refund requests received:

- Before shipment of textbooks – receive a full refund less a \$75 admin fee
- Within the first month of the semester (or a quarter through) – receive the amount paid less the cost of the textbook and a \$75 admin fee
- Within the second month of the semester (or halfway through) – receive the amount paid less the cost of the textbook and a \$100 admin fee. After two months, refunds will not be permitted.

## TEXTBOOKS

Once registration has been processed and paid in full, please allow 3-5 business days to arrive via courier. Textbook fees are non-refundable once they've been shipped.

## EXAM DATE TRANSFERS

Written notice (emails are accepted) must be received to be eligible for a transfer request.

Exam date transfers:

- Will not be permitted within one month of an exam
- Are subject to a transfer fee (\$75 for members; \$100 for non-members) to the next preferred exam sitting
- No more than two transfers per CAIB part are permitted; re-sit fees are non-refundable and payments will be processed after the exam when a change or transfer is received after the deadline.

## NO SHOWS/EXAM RESITS

Registrants who fail to attend/cannot attend their scheduled exam must provide supporting documentation (medical or family emergency). Without valid documentation, registrants are subject to a no-show fee the next time they register for the exam (\$150 for members; \$190 for non-members).

Fees to rewrite an exam if scored below passing grade of 60%, is \$135 for members and \$175 for non members.

***Note: It's the student's responsibility to become familiar with the Registration Policy prior to enrollment. Please keep a copy of registration information for your records. Mail, fax or email completed registration forms to:***

# CPIB REGISTRATION FORM (PLEASE COMPLETE ALL APPLICABLE FIELDS)

## 1. Applicant Information

Member ID: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Brokerage (for shipping): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

## 2. Select Course

Law & Ethics

Claims Management

Advanced Personal Lines

Advanced Commercial Lines

Business Strategy

## 3. Select Semester and Exam Location (if applicable)

Winter Semester

Summer Semester

Fall Semester

Requested Exam City: \_\_\_\_\_

## 4. Payment Options

Fee Enclosed (please refer to website for fees): \$ \_\_\_\_\_

Brokerage Cheque     Certified Personal Cheque     MasterCard     VISA

Card #: \_\_\_\_\_ Card Expiry: \_\_\_\_\_

Check one:  
 Personal card  
 Brokerage card

Cardholder: \_\_\_\_\_ Signature: \_\_\_\_\_

## 5. Applicant Declaration

I \_\_\_\_\_ confirm that the above information is correct. I agree to participate in the above course and abide by the CPIB Registration Policy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Mail, fax, or email completed registration forms (with payment) to:

Robyn Campbell, Broker Designations Coordinator, designations@ibao.on.ca | fax: 416 488 7526  
 Insurance Brokers Association of Ontario, 700-1 Eglinton Avenue East, Toronto, ON M4P 3A1