



Certified Financial Manager in Trust and Estate Planning

Introduction

This is a pioneer program in the Asia Pacific region to nurture professionals to broaden their horizons in wealth management in trust and estate planning in a systematic and practical approach.

Objectives

Provide professional and practical knowledge in trust and estate planning, in relations to legal and financial aspects.

Five Modules

1. Investment Risk Management
2. Trust Planning
3. Taxation and Estate Planning
4. Retirement and Wealth Protection
5. Case Studies in Wealth Planning

For enquiries:

Please contact our appointed exclusive representative:

Website: <http://www.cfmtep.org>

IFC Representative:

Mr. Alman Wong
Tel: 852 - 91917399, 86 - 138 2337 1687
Email: info@cfmtep.org

Course Director:

Mr. W C. Kuk
Tel: 852 - 904453513, 86 - 139 2270 0242

Wechat: cfmtep in IFC

Email: cfmtep.ifc@gmail.com
cfmtep_ifc@163.com



THE INSTITUTE OF FINANCIAL CONSULTANTS
國際金融顧問協會

**Application for Admission of
Certified Financial Manager in Trust and Estate Planning**
财富传承(遗产)规划顾问会员申请

1 Personal Details 个人资料

Surname 姓 _____ Forename(s) 名 _____ 性别: 男 女

Home Address 住宅地址: _____

Postcode 邮编 _____ Telephone 联络电话 _____ E-mail 电邮 _____

Date of Birth 出生日期 _____ ID no. 身份证号码 _____ Nationality 国籍 _____

Present Company 现时雇主 _____

Business address 公司地址 _____

Postcode 邮编 _____ Telephone 公司电话 _____ Facsimile 传真 _____

Preferred correspondence (please tick) 联系选择 : Home 住宅 Business 公司

2 Academic Details 学术资历

School and Specialty 毕业院校及专业 _____ Year 毕业年份 _____ Place of Study 院校地区 _____

3 Career Details 职业资料

Present Company/Organization 现任公司

Company name 公司名字 _____ Date Joined 加入年份 _____

Division 工作部门 _____

Total number of Employees (up to..) 49 99 499 999 4999 9999 9999 以上
公司人数

Nature of Company's Business 公司性质 _____

Your current appointment 申请人现任岗位

Job Title 职位 _____ Date appointed 开始日期 _____

Your previous working experience 过去工作经验

Year 年份	Company 公司	Job Title 职位
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4 References 咨询人

A REFERENCE MUST BE SUPPLIED BEFORE THE APPLICATION IS PROCESSED

申请人必需提交一位咨询人以供查核您的品格及财务规划能力

Must be a director or senior officer of your company or organization. 咨询人需为申请人的上级同事或行业专业人士，并熟悉申请人行为能力

Name 姓名 _____ Job Title 工作职位 _____

Company 公司 _____ Telephone 电话 _____

5 Signature 签名

I agree to accept the decision of the Council as my eligibility for election to the Certified Financial Manager in Trust and Estate Planning. If elected I agree to abide by the Institute's Charter and Bye-laws and to observe the provisions of the Institute's Code of Professional Standards. I confirm that the information supplied in support of my application for membership is correct.

本人愿意接受国际金融顾问协会对本人申请成为财富传承(遗产)规划顾问会员的审核，如成功被推选为会员，本人将遵守协会的各项条例、章程及所承诺的专业操守。本人同时确认申请表上的资料全属事实。

Signature 签名 _____ Date 日期 _____

PAYMENT METHOD 付款方法

- Cheque 支票
made payable to "ASIAN FINANCE AND MANAGEMENT CONSORTIUM COMPANY LIMITED"
抬头“亚洲财金管理联合会有限公司”。