

CAii, AAii (Level 1 and 2) Exemption & Credit Transfer Application Form



Please read and understand the exemption guidelines before completing this form.

Section A	Personal Details			
Name (as in IC/ID)				
I.C. / Passport no.				
Email				
Correspondence address				
	Postcode		Contact no.	
Company name & Office address				
Office tel. no.				

Section B	Exemption(s) Applied for:	
Programme	Subjects offered	Please tick (☑)
Certificate of GAMP	301 Insurance Principles and Market Practice (General)	<input type="checkbox"/>
	310 Insurance Principles and Market Practice (Life)	<input type="checkbox"/>
Associateship of GAMP Level 1	302 Insurance Operations and Finance	<input type="checkbox"/>
	303 Legal Principles	<input type="checkbox"/>
	304 Insurance Claims	<input type="checkbox"/>
	305 Insurance Underwriting	<input type="checkbox"/>
	306 Motor Insurance	<input type="checkbox"/>
	307 Liability Insurance	<input type="checkbox"/>
	308 Personal Lines Insurance	<input type="checkbox"/>
	309 Commercial Property and Business Interruption	<input type="checkbox"/>

Associateship of GAMP Level 2	401 Insurance Law	<input type="checkbox"/>
	402 Insurance Business and Economics	<input type="checkbox"/>
	403 Insurance Marketing	<input type="checkbox"/>
	404 Insurance Claims Management	<input type="checkbox"/>
	405 Insurance Underwriting Management	<input type="checkbox"/>
	406 Insurance Risk Management	<input type="checkbox"/>
	409 Medical and Health Insurance	<input type="checkbox"/>
	410 Reinsurance	<input type="checkbox"/>
	411 Takaful	<input type="checkbox"/>

Section C	Certified Copies of Submitted Documents (Certificates / Academic Transcripts)
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Ensure all the supporting documents are **certified true copies**.

Date of award	Qualification (As it appears on your certificate)	Awarding University / Institute / Professional Body & Country

Section D	Personal Data Protection Act 2010 & Applicant's Declaration
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Important Notice

In regard to Personal Data Protection Act 2010 ("**the Act**"), please note that your personal data is used, stored, disclosed and processed by Aii solely for the Purpose of processing exemption and/or in connection to other Aii products or services. Your personal information may also be disclosed or transferred to a relevant third-party, i.e. to the industry-related associations, industry-related companies, government agencies and any of their respective agents. Any inquiries or complaints with respect to your personal information may also be channeled to Aii by submitting such request to Aii via post, or email (customer@aiiasia.org).

Applicant's Declaration

1. I am deemed to have consented to Aii to use, store, disclose and process my personal data for the Purpose mentioned above and agree to comply with and be subject to the jurisdiction of all rules and regulation of Aii concerning the exemption application.
2. I declare that to the best of my knowledge, the information supplied in this application form and the supporting documents are correct and complete. If my application is successful, I agree to abide by all the rules and regulations of Asian Institute of Insurance (Aii).
3. In connection with my application to Asian Institute of Insurance for exemption, I understand that reference checks and requests for verifications regarding my qualification and education may be made. Verification issued by the awarding body will include my full legal name at the time of study, the level of qualification undertaken, the full course title, the mode of attendance (i.e. full time or part time), the start date, and award date and classification achieved (if applicable). If I was permanently withdrawn from my studies, this will also be shown in the final document. I also understand "references and verifications may take 10 to 30 working days" to be completed from the submission of correct details.
4. I give my consent to the awarding body/university/institution to release the above education and qualification details to Asian Institute of Insurance.
5. I am deemed to have consented that Aii can use, store, disclose and process my personal data for the purpose mentioned above and agree to comply with and be subject to the jurisdiction of all rules and regulations of Aii concerning the exemption application.
6. If my application is successful, I agree to abide by all the rules and regulations of Asian Institute of Insurance.

Signed	Date
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Important Note: Please be advised that the Institute's decision regarding the granting of exemptions is final and no further appeals will be permitted.

For office use only		
1. Exemption applied for		Certificate of GAMP
		Associateship of GAMP Level 1
		Associateship of GAMP Level 2
2. Certified copies of documents submitted		Degree/Diploma/Professional Certificates
		Transcripts of results
		Syllabuses
3. Applicant's Qualification title		
4. Year awarded / within last 10 years?	Yes	No
5. Payment details	Amount (RM/UaSD)	Receipt No.
6. Approved exemption(s) (subject code)		
7. Disapproved exemption(s) (subject code)		
8. Further assessment / documentation required?		
9. Remarks		
10. Prepared / processed by	Sign	Date
11. Verified by	Sign	Date
12. Approved by	Sign	Date