

NOTE: Only **ORIGINAL** forms will be accepted
 129 Edward St., Port of Spain – email: ttaifa@tsst.net.tt
 Revision 01.2010



The Life Underwriters Training Course (LUTC) &
 The Financial Service Specialist (FSS)

Deferral Form

[Applications will NOT be processed without complete information and full tuition. Name should appear exactly as you want it on official documents. Print clearly].

Indicate enrolment year: 20 _____ Check box below to indicate module being deferred

PLEASE PRINT OR TYPE

CARAIFA Student ID# _____

Last Name: _____ First Name: _____ Middle Initial: _____

Date of Birth _____ Email Address _____

Company Name: _____ Branch Address _____

Office Phone: _____ Mobile Phone: _____

Any Medical Conditions: _____

Physician's Name: _____ Office Phone _____

I am deferring the following Examination

- LUTC 202 Meeting Clients Needs
- LUTC 201 Exploring Personal Markets
- LUTC 251 Business Continuity
- LUTC 261 Retirement Planning
- LUTC211 Disability Income
- FSS262 Foundations of Financial Planning an Overview
- FSS 263 Foundations of Financial Planning: The Process
- FSS 264 Foundations of Investment Planning
- LUTC/FSS 290 [Ethics for financial professionals]

Deferred to: Month _____ Year _____

PLEASE INDICATE WHERE YOU WOULD LIKE TO ATTEND CLASSES

NORTH SOUTH EAST TOBAGO

Association Member	\$750.00 TT per module			
Non-Association Member	\$1,500.00 TT per module			
Payment Method (Darken circle)	Personal Cheque	Company Cheque	Cash	\$
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APPLICANT'S STATEMENT: I understand that (1) successful completion of the course is based on class participation, written assignments and field projects, 80% attendance (NO EXCEPTION) and a passing grade on a final examination acceptable to CARAIFA and (2) my enrollment and final status may be reported to my company. I further understand that any student whose behavior adversely affects reasonable order and harmony in class is subject to disenrollment, and may be barred from future participation in LUTC courses. The information on this application is accurate to the best of my knowledge.

I have read, understood and agreed to the terms stated above,

Applicant Signature _____

Date _____