

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



The Life Underwriters Training Course (LUTC)

Ethics (290) - Enrollment 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_____ Indicate Semester below

| SEMESTER | ENROLMENT DEADLINES | EXAM DATE |
|----------------------------|---------------------|-----------|
| <input type="checkbox"/> 1 | October 1st | March |
| <input type="checkbox"/> 2 | February 1st | July |
| <input type="checkbox"/> 3 | June 1st | November |

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 registering for the Ethics course (course earns 60 designation credits)

LUTC 290 – Ethics for Financial Professionals

(Note that applicants must have completed the other 5 modules except those who had exemptions – {LUATC, IFATC})

PLEASE INDICATE WHEN THE FOLLOWING COURSES WERE COMPLETED?

| | YEAR | | YEAR |
|----------|-------|----------|-------|
| LUTC 201 | _____ | LUTC 202 | _____ |
| LUTC 211 | _____ | LUTC 251 | _____ |
| LUTC 261 | _____ | | |

EXEMPTIONS Please indicate when you **completed** LUATC or IFATC or **what parts of the IFATC** were completed e.g. (101, 102, 103), to be eligible for an exemption. The exemption would be granted upon verification of your statement:

LUATC Graduate Year _____ **IFATC Graduate** Year _____

PARTS completed & year: _____

| | | | | |
|--------------------------------|--------------------------|-----------------|------|----|
| Association Member | \$2,500.00 TT per module | | | |
| Non-Association Member | \$3,250.00 TT per module | | | |
| Payment Method (Darken circle) | Personal Cheques | Company Cheques | Cash | \$ |
| | O | O | O | |

APPLICANT'S STATEMENT: I understand that (1) successful completion of the course is based on class participation, written assignments and field projects, 80% attendance (NOEXCEPTION) 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