

Level 4 Certificate for Documentary Credit Specialists (CDCS®)

Registration and payment form

To register for CDCS®, please complete this form in BLOCK capitals and either scan and email it to customerservices@libf.ac.uk or post to:
Customer and Student Services, The London Institute of Banking & Finance, 4-9 Burgate Lane, Canterbury, Kent CT1 2XJ United Kingdom

YOUR DETAILS

LIBF number (if known) _____ Title (Mr/Mrs/Ms etc) _____

First name(s) / Given name(s) _____

Last name / Family name _____

Previous name (Please tell us any previous name you have used that would help us link this registration to any other records we may hold for you)

Date of birth* (DD/MM/YYYY) _____ Gender Male Female

*A date of birth is compulsory to activate your online account.

CONTACT DETAILS

Email address* _____

Please provide a telephone number we can use to contact you if necessary:

Telephone no. _____ Mobile no. (if different from Telephone no.) _____

Security word _____

Please tick relevant prompt for security purposes Mother's maiden name Place of birth Memorable date

*Please note that having a valid email address is a compulsory requirement of study.

EMPLOYMENT

Job title _____

Employer / business name _____

ADDRESS DETAILS

Business address _____

Postcode / Zipcode _____ Country _____

Home address _____

Postcode / Zipcode _____ Country _____

Please indicate which address you would prefer us to use for postal correspondence: Business Home

Delivery address (Please select an address where your study materials can be delivered,
or add a delivery address below if it is different from the addresses above)

Business Home

Delivery address* _____

*Please do not use a UK PO BOX number.

SPECIAL REQUIREMENTS

Do you consider that you may require us to make adjustments to your studies or examination attendance?

Yes No

(If you answer 'Yes' to this question a member of staff will contact you.)

WHERE DID YOU HEAR ABOUT US?

Web Search Advert

Email / letter Colleague / Employer

Exhibition

Name _____

CDCS® EXAMINATION VENUE

CDCS® examinations will take place in a number of global centres. Specific centre locations can be found at:
www.libf.ac.uk/examvenues
The London Institute of Banking & Finance reserves the right to withdraw centres subject to demand.

Please indicate your preferred examination venue from the list on our website:

Please note; it is your responsibility to make travel, accommodation and VISA arrangements.

CDCS® REGISTRY

On successful completion of the CDCS® your name and employer will be added to the CDCS® Registry available online at www.CDCSinternational.org

If you do not wish to have your details included on the online CDCS® Registry please tick here

FEES AND PAYMENT DETAILS

| | |
|--|---------|
| CDCS® registration (£500.00) | £ _____ |
| International booking fee* (£55.00) | £ _____ |
| CDCS® resit (£310.00) (materials not included) | £ _____ |
| International booking fee for resit* (£22.00) | £ _____ |

TOTAL PAYABLE £ _____

*Candidates sitting the CDCS® examination outside of the UK are required to pay an international booking fee, in addition to their registration or resit fee

Payment options

- Please send me an invoice
- I enclose a cheque for total payable, made payable to The London Institute of Banking & Finance
- I will pay by bank transfer (ensuring all bank charges are covered)
- I authorise The London Institute of Banking & Finance to debit my Visa / MasterCard / debit card for the total payable

Card number

Expiry date / Valid from /

Issue number (if applicable) Security number*

Signed _____ Date _____

*This is the last 3 digits found on the signature strip on the reverse of your card.

Bank transfer information (please provide your details with the transfer so we can trace your payment):

Account Name: The London Institute of Banking & Finance
Account Number: 10514632
Sort Code: 20-17-92
International Bank Account Number (IBAN): GB83 BARC 2018 0010 5146 32
SWIFTBIC (Bank Identifier Code): BARCGB22

USING YOUR PERSONAL INFORMATION

We will use your personal information to process this registration and your examination entry. We will share details with the ICC and with the organisations that deliver our examinations and manage the delivery of your study materials.

We may release your examination results and details of qualifications gained, at the request of your employer. In addition, your details may be included in statistical data reported to UK bodies such as Ofqual and the Department for Education.

You can access information we hold about you, and update that information if necessary, by logging onto the secure website www.mylibf.com.

Additional details of how personal information is used can be found within the data protection / privacy statement on our website (www.libf.ac.uk).

DECLARATION

I confirm that the information given on this form is correct and that I consent to the processing of my personal data.

Signed* _____

Date _____

*Please note that all unsigned forms will be returned and will cause delay in the processing of your registration.

From time to time, The London Institute of Banking & Finance may wish to send you information on its products and services that may be relevant to you. If you do **not** wish to receive further information, please tick the box:

OFFICE USE ONLY

Date Received _____

Processed By _____

Date Processed _____

Payment Successful Yes No N/A

Reason Adjustments sent Yes No N/A