

# CERTIFIED FINANCIAL PLANNER (CFP)

## MODULE 2: INSURANCE PLANNING AND ESTATE PLANNING

### OBJECTIVES

This course is designed to help candidates understand the fundamental concepts of risk management, insurance and estate planning and gain the knowledge about various personal insurance products, both life and general, which are related to financial planning and estate planning tools such will, power of attorney and trust as well as taxation issues affecting estate planning. The candidates are expected to be able to apply these concepts and understand how to formulate appropriate financial plans in assisting their clients.

### COURSE DETAILS

**DATE: 7 MARCH - 14 JUNE 2020**  
(SATURDAY, SUNDAY)

**TIME: 10.00A.M. — 5.00P.M.**

**VENUE: TAR UC, KUALA LUMPUR**

### EXAMINATION DETAILS

**DATE: 27 JUNE 2020 (SATURDAY)**

**TIME: 9.00A.M. — 12.00NOON**

**VENUE: TAR UC, KUALA LUMPUR**

### COURSE FEES

Course Fees		
Candidate	Payment to TAR UC	Payment to FPAM
DBF/DFI/RBF/RFI TAR UC Students/ Alumni	RM600.00*	RM500.00*
Public	RM1,060.00*	RM600.00*
* Inclusive of 6% SST. Payment to FPAM includes registration fee, textbook, examination and 1 year CFP membership. Payment to TAR UC includes tuition fee and additional notes.		

### FOR ENQUIRIES & REGISTRATION

TUNKU ABDUL RAHMAN UNIVERSITY COLLEGE  
Centre for Continuing and Professional Education  
Tel: 03-4145 0170 (Direct Line)  
03-4145 0123 ext: 3516 (Ms Lee)  
Email: [cpe@tarc.edu.my](mailto:cpe@tarc.edu.my)  
Website: [www.tarc.edu.my](http://www.tarc.edu.my)



**TARC**  
TUNKU ABDUL RAHMAN  
UNIVERSITY COLLEGE  
**BEYOND EDUCATION**



### COURSE OUTLINES

Topic 1: Fundamental Concepts in Risk Management

Topic 2: Insurance Fundamentals

Topic 3: Legal Principles in Insurance

Topic 4: The Role of Insurance in Financial Planning

Topic 5: Factors Affecting life Insurance Needs

Topic 6: Understanding Life Insurance Policy Contracts

Topic 7: General Insurance Policy Contracts

Topic 8: Health Insurance

Topic 9: Annuity Policy Contracts

Topic 10: Legislation and Rules in the Insurance Industry

Topic 11: Consumer Protection and Insurance Industry Codes of Practice

Topic 12: Estate Planning Fundamentals

Topic 13: Wills and Will Planning

Topic 14: Trusts

Topic 15: Power of Attorney

Topic 16: Duties and Power of the Personal Representative

Topic 17: Special Estate Planning Issues for Business Owners

## Registration Form

### Module 2: Insurance Planning and Estate Planning

(TAR UC Student/ Alumni) Tuition Classes: 8 March – 7 June 2020

(Public) Tuition Classes: 7 March – 14 June 2020

To register, please submit completed registration form and payment as follows:

Director, Centre for Continuing and Professional Education  
Kolej Universiti Tunku Abdul Rahman  
P.O. Box 10979  
50932 Kuala Lumpur  
Tel: 03-4145 0170 (Direct Line)  
Tel: 03-4145 0123 ext: 3516 (Ms Lee)

**Closing date:  
2 March 2020**

#### Participant Details

Name : \_\_\_\_\_

New IC No : \_\_\_\_\_ Student ID/ Alumni No: \_\_\_\_\_

Course : \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

Correspondence Address: \_\_\_\_\_

\_\_\_\_\_

Tel No (H) : \_\_\_\_\_ Tel No (O) : \_\_\_\_\_

Fax No : \_\_\_\_\_ Handphone No : \_\_\_\_\_

Email : \_\_\_\_\_

#### Payment Details

1. Transfer / Cheque / Bank draft no: \_\_\_\_\_ for amount of RM600.00/ RM1060.00\* made in favour of '**KOLEJ UNIVERSITI TUNKU ABDUL RAHMAN**'.  
Payment via Public Bank Account 3181564113. Please email the bank-in slip to us for record.
2. Direct payment to Financial Planning Association of Malaysia as follows:  
Transfer / Cheque / Bank draft no: \_\_\_\_\_ for amount of RM500.00/ RM600.00\* made in favour of '**FINANCIAL PLANNING ASSOCIATION OF MALAYSIA**'.  
Payment via Alliance Bank Account 121090010005395. Please email the bank-in slip to us for record.

\*(Inclusive of 6% SST)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### Terms & Conditions

- ☒ Registration is on a first-come-first-served basis.
- ☒ Participants are requested to submit one form per participant.
- ☒ All registrations **MUST** be accompanied with the full payment.
- ☒ There is no refund on cancellation after registration but a replacement is allowed prior to course commencement.
- ☒ Please note that the registration and examination fees are not refundable.
- ☒ Kolej Universiti Tunku Abdul Rahman reserves the right to amend or change the programme, venue or speaker, or cancel the programme if warranted by circumstances beyond its control. In the event of cancellation, all fees paid will be refunded.

#### Refund Policy

- A) Full Refund  
Full refund will be made only if:  
~ the student's application is rejected, or
- B) Partial Refund  
~ 50% of the course fees is refundable if the student withdraws at least 14 days before the course commences.  
~ the letter requesting withdrawal from the course together with the original receipt must reach Kolej Universiti TAR at least 7 days before the date of the first class.
- C) No Refund  
~ a student is not entitled to any refund of the course fees if the student withdraws from the course after commencement of the first class.

**GST TAX FILE NO. :000173154304**

## ASSOCIATE MEMBER APPLICATION FORM – CFP CERTIFICATION COURSE

Please complete in "BLOCK LETTERS". (Please circle where applicable)

### 1. PARTICULARS OF APPLICANT

<b>Name (Full name as in NRIC):</b>			
<b>New IC number / Passport No.:</b>		<b>FPAM Member ID:</b>	
<b>Correspondence Address:</b>			
		<b>Post Code:</b>	
<b>Mobile No.:</b>		<b>Home Tel.:</b>	
<b>Email address (Preferred):</b>			
<b>Email address (Alternate):</b>			
<b>Gender : Male / Female</b>	<b>Marital Status: Single / Married / Others</b>	<b>Race : Bumiputra / Chinese / Indian / Others</b>	

### 2. EDUCATION ATTAINED

University	Qualification	Year Awarded

### 3. EMPLOYMENT

<b>Name of Organisation:</b>			
<b>Company's address:</b>			
<b>Post Code:</b>		<b>Office No.:</b>	<b>Fax No.:</b>
<b>Job Title:</b>		<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed	
<b>Industry Profile:</b>	INSURANCE	UNIT TRUST	BANK
	ACCOUNTANT	ASSET MANAGEMENT	FINANCE COMPANY
TRUST & WILLS	STOCK BROKING	FINANCIAL ADVISORY	NON FINANCE CORPORATION
	ACADEMIA	STUDENT	

### 4. OTHER INFORMATION

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| 1. Have you ever been charged or convicted in a court of law, or are there any pending charges?                                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Have you had a business related licence, registration or membership revoked, denied or suspended?                               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Are you an undischarged bankrupt or ever been declared bankrupt?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Have you ever been refused membership of a statutory professional or other body in respect of your professional capacity?       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Have you ever been subject to disciplinary proceeding or expelled by a statutory body in respect of your professional capacity? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Have you ever been dismissed or had a proper authority withdrawn on ethical or legal grounds?                                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Have you ever have past or pending claims made against your professional indemnity insurance in relation to financial advice?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Note: If you have answered YES to any of the above questions, please attach relevant documents which provide full details of the matters.

### 5. PAYMENT

Payment to : **FINANCIAL PLANNING ASSOCIATION OF MALAYSIA**

Application fee : ☐ **RM150** - January to December    ☐ **RM75** - July to December

☐ By Cash    ☐ By Cheque : \_\_\_\_\_

☐ By Credit Card (Direct Debit)    ☐ VISA    ☐ MASTER    ☐ AMEX (for AMEX card holder : 4 digit bank code on front of card \_\_\_\_\_ )

Card number : \_\_\_\_\_ Card Expiry date: \_\_\_\_\_

### 6. DECLARATION (BY APPLICANT)

I hereby declare that all information is true to the best of my knowledge, and I understand FPAM reserves the rights to verify information I have provided in this form. I agree to adhere by FPAM's Professional Code of Ethics & Professional Responsibilities.

Signature : \_\_\_\_\_ Date : \_\_\_\_\_

Approved By : \_\_\_\_\_

AFPM No. : \_\_\_\_\_



UNIT 305, BLOCK A  
PHILEO DAMANSARA I  
JALAN 16/11, OFF JALAN DAMANSARA  
46350 SELANGOR  
TEL : 03 - 7954 9500  
FAX : 03 - 7954 9400  
WEBSITE: [www.fpam.org.my](http://www.fpam.org.my)

GST TAX FILE NO. :000173154304

## TARUC STUDENTS ONLY

For office use only	
Expiry date	
Discrepancy	
Approve for entry	
O/R #	

# REGISTRATION FOR THE CERTIFICATION PROGRAM EXAMINATIONS

## Complete in full using BLOCK LETTERS

This form must be submitted within the following timeframe:

- a. To FPAM - 7 weeks before the examination date
- b. To Education Providers - 8 weeks before the examination date

FPAM has the sole discretion:

- To switch candidates to another examination venue if insufficient candidates are registered at the preferred examination venue and;
- To allocate the examination venue if the venue has not been chosen. FPAM's decision is final.

<b>Name:</b>		<b>New I/C No.:</b>		
<b>Membership No: (Trade/Associate Member)</b>		<b>TARUC Stamp :</b>		
<b>Name of module to be examined</b>	<b>Exam session</b>	<b>First Sitting</b>	<b>Re-sitting</b>	<b>Exam Venue (pls circle)</b>
				KL - KUALA LUMPUR
				PG - PENANG
				KK - KOTA KINABALU
				KCH - KUCHING
				JB - JOHOR

## IMPORTANT REMINDER

- a. Please ensure that your membership is valid at time of registration and upgrade your membership if necessary.
- b. You must be an Associate Member to register for Modules 2 to 4. (Except for Challenge Status candidates).
- c. All candidates must be enrolled in a CFP certification Program with an Approved Education Providers.

Exam fees payable :	RM	Office Contact:	Fax No.:
* Cash	<b>For internet banking or online transfer, please attach copy of payment receipt / banking slip for proof of payment</b>		
Cheque No.		Mobile No.:	Email :
Credit Card No.:		Card type: VISA / MASTER / DINERS / AMEX	
Card Expiry date:		for AMEX card holder (pls provide 4 digits bank code on front of card)	

Kindly make your cheque payable to **FINANCIAL PLANNING ASSOCIATION OF MALAYSIA**

\* **FPAM Maybank Account no. 514075128677**

**Note: Examination Fees Payable**

• Administrative and Resource Fee	RM150.00
• Examination Fee	RM200.00
<b>Total</b>	<b>RM350.00</b>

\_\_\_\_\_  
Candidate/Card holder's signature  
authorizing credit card direct debit

**FPAM will not entertain any request for cancellation or postponement of examination by the candidates after receipt of this Examination Registration form. No refunds of the examination fees will be made under any circumstances.**



UNIT 305, BLOCK A, PHILEO DAMANSARA I  
JALAN 16/11, OFF JALAN DAMANSARA  
46350 PETALING JAYA, SELANGOR  
TEL : 03 - 7954 9500  
FAX : 03 - 7954 9400  
WEBSITE: [www.fpam.org.my](http://www.fpam.org.my)

## NON TAR STUDENTS

For office use only

Expiry date	
Discrepancy	
Approve for entry	
O/R #	

GST TAX FILE NO. :000173154304

## REGISTRATION FOR THE CERTIFICATION PROGRAM EXAMINATIONS

### Complete in full using BLOCK LETTERS

This form must be submitted within the following timeframe:

- To FPAM - 7 weeks before the examination date
- To Education Providers - 8 weeks before the examination date

FPAM has the sole discretion:

- To switch candidates to another examination venue if insufficient candidates are registered at the preferred examination venue and;
- To allocate the examination venue if the venue has not been chosen. FPAM's decision is final.

<b>Name:</b>		<b>New I/C No.:</b>		
<b>Membership No:</b> (Trade/Associate Member)		<b>Education Provider:</b> (To be stamped by UTAR)		
<b>Module</b>	<b>Exam session</b>	<b>First Sitting</b>	<b>Re-sitting</b>	<b>Exam Venue (pls tick ✓)</b>
				KL - KUALA LUMPUR
				PG - PENANG
				KK - KOTA KINABALU (June/July session only)
				KCH - KUCHING (Dec session only)
<b>M4 (Candidate is required to complete the work experience summary form, please request form from EP or FPAM)</b>				JB - JOHOR BAHRU

### IMPORTANT REMINDER

- Please ensure that your membership is valid at time of registration and upgrade your membership if necessary.
- You must be an Associate Member to register for Modules 2 to 4. (Except for Challenge Status candidates).
- All candidates must be enrolled in a CFP certification Program with Approved Education Providers.

Exam fees payable :	RM	Office Contact:	Fax No.:
Cash / Cheque No.		Mobile No.:	Email :
Credit Card No.:		Card type: VISA / MASTER / DINERS / AMEX	
Card Expiry date:		for AMEX card holder (pls provide 4 digits bank code on front of card)	

Kindly make your cheque payable to **FINANCIAL PLANNING ASSOCIATION OF MALAYSIA**

<b>Exam Fees Payable</b>	
(a) Administrative and Resource Fee	<b>RM150.00</b>
<b>Plus (b) Examination Fees (6% GST included) (Please choose one only)</b>	
** Students working with Charter Members	<b>RM200.00</b>
** Students working with Corporate Members } Individuals (Public)	<b>RM250.00</b> <b>RM300.00</b>
<b>Total = (a) Administrative &amp; Resource Fee + (b) Examination Fee</b>	_____

Candidate/Card holder's signature  
authorizing credit card direct debit

**FPAM will not entertain any request for cancellation or postponement of examination by candidates after receipt of this Examination Registration form. No refund of the examination fees will be made under any circumstances.**

### TO BE COMPLETED BY CHARTER OR CORPORATE MEMBER

**\*\* (If no endorsement from employer is provided in the space below, candidates will be considered as individuals (Public))**

We certify that the candidate named in this registration form is an employee or agent of our company.

Signature

Company Stamp

Name & Designation

General Manager or Branch Manager

Date: