

CFA Institute University Recognition Program Scholarship

Verification Form– December 2015 Exam

This form must be submitted no later than 02 September 2015. You and the Principal Contact must complete the below information and sign where indicated. Once your scholarship has been processed and approved, you will receive further instructions by email within four (4) weeks. An international travel passport is required for CFA Program enrollment/registration.

Return form to CFA Institute University Relations: email to university@cfainstitute.org

SCHOLARSHIP FEE: US\$350 (includes the eBook curriculum only) NOTE: the printed curriculum is available separately for an additional cost of US\$150 plus any fees associated with shipping such as import duties, customs fees, shipping fees and/or taxes.

Complete Student Section by typing into the editable form fields

Student Completes Following

CFA INSTITUTE IDENTIFICATION # (IF APPLICABLE) DATE OF BIRTH (DAY/MONTH/YEAR)

MR. MISS MS. MRS. DR. PROF. REV. HON.

NAME OF COLLEGE/UNIVERSITY PREFIX: (CHECK ONE)

IMPORTANT: YOUR NAME ON CFA INSTITUTE RECORDS MUST BE THE SAME AS THE NAME ON YOUR INTERNATIONAL TRAVEL PASSPORT.

FIRST (GIVEN) NAME MIDDLE NAME OR INITIAL LAST NAME (SURNAME OR FAMILY NAME)

MAILING ADDRESS CITY STATE COUNTRY

E-MAIL ADDRESS (MUST BE LEGIBLE TO ALLOW RECEIPT OF IMPORTANT COMMUNICATIONS) TELEPHONE NUMBER (INCLUDE COUNTRY CODE, AREA OR CITY CODE, AND LOCAL)

Yes No I certify that I am a full-time undergraduate student in my final year of study or a full- or part-time graduate student and that I meet the Entrance Requirements for the CFA Program. The Principal Contact is sponsoring me for a scholarship.

Yes No I certify that I have reviewed and will adhere to the Official Rules for the Scholarship Program on the CFA Institute website.

CANDIDATE SIGNATURE

DATE (DAY/MONTH/YEAR)

Recognized University Completes Following

PRINCIPAL CONTACT NAME

CFA INSTITUTE IDENTIFICATION # (IF APPLICABLE)

NAME OF COLLEGE/UNIVERSITY

COLLEGE/UNIVERSITY MAILING ADDRESS CITY STATE COUNTRY

E-MAIL ADDRESS (MUST BE LEGIBLE TO ALLOW RECEIPT OF IMPORTANT COMMUNICATIONS) TELEPHONE NUMBER (INCLUDE COUNTRY CODE, AREA OR CITY CODE, AND LOCAL)

I certify that I am the Principal Contact for my university and that my university participates in the University Recognition Program as defined on the CFA Institute website.

PRINCIPAL CONTACT SIGNATURE

DATE (DAY/MONTH/YEAR)

Plan early! CFA Institute will not accept forms received after 2 September 2015.

For the current exam offering, the CFA Program enrollment fee (if applicable) is waived. Scholarship applicants pay a discounted registration fee that includes the e-book curriculum. Scholarships cannot be deferred to another exam offering.

OFFICE USE ONLY

Prepaid

Will register online

Refund due

Offer Code: SCHR

Date: _____

Authorization: _____