
CHS Designation Holder's Agreement for 2020

Renewal of your CHS Designation for the 2020 Calendar Year

2020 Designation Requirements

Your CHS designation (hereafter, "CHS") must be renewed annually with The Institute for Advanced Financial Education (hereafter, "The Institute"). The requirements pursuant to this CHS Designation Holder's Agreement (hereafter, "The Agreement") for annual renewal include:

- an annual licensing fee
- adherence to The Institute Code of Professional Conduct & Disciplinary Procedures, and
- a minimum of 10 continuing education (CE) credits each calendar year. Each hour of CE must be approved by The Institute in order to qualify as a CE credit. Any deficiency in one year must be made up by the end of the next calendar year, in addition to the full year's CE credits requirement

For more information, please visit <http://www.iafe.ca/Continuing-Ed-FAQ.aspx>.

2020 CHS Fee

All fees must be submitted to The Institute with the appropriate renewal form by no later than January 31 of the renewal year. Please note that fees are non-refundable and non-transferable.

2020 CHS Renewal

To renew your CHS designation with The Institute, you can either:

- renew online by visiting www.iafe.ca, or
- mail or courier this renewal document, completed and signed, along with either credit card information on the invoice you received, or payment made by cheque.

All questions contained in this form must be answered in order for your CHS to be renewed for the 2020 year. Failure to properly and fully complete this document will delay the granting of your CHS marks and usage rights.

The renewal term for CHS marks (and the rights to use them) is granted on an annual basis and expires by end-of-day December 31 of each calendar cycle. A CHS designation holder who fails to meet all continuing education requirements risks having his or her designation revoked due to non-compliance. CHS designation holders who do not renew by January 31, 2020, will no longer be authorized to hold themselves out to the public as a CHS designation holder and will have their designation revoked.

Note: Only persons who apply for and maintain their CHS for 2020 will appear in The Institute's online Public Registry as being a CHS designation holder in good standing.

CE Audit

The Institute will commence auditing for CE credits for the 2020 calendar year in 2021. By renewing your CHS for 2020, you hereby agree to the terms of this Agreement — this includes the requirement to maintain sufficient CE credits for 2020 — and to be subject to a possible random CE audit in 2021.

Reporting for the 2019 Calendar Year

Bankruptcy, Disciplinary and Criminal Declarations

In the 2019 calendar year, have you:

been declared bankrupt or made a voluntary assignment into bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
been convicted or found liable in a criminal or civil proceeding involving fraud, misrepresentation or the misappropriation of funds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
had any unresolved criminal charges or civil actions filed against you involving fraud, misrepresentation or the misappropriation of funds which may have been initiated during the 2019 calendar year or earlier?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
made an offer to settle or have settled a civil dispute during the 2019 calendar year involving fraud, misrepresentation or the misappropriation of funds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
have been the subject of an investigation or disciplinary hearing conducted by an organization or self-regulatory body?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you have answered Yes to any of the above questions, you must provide a supplementary written explanation with full details of the matter(s) at hand. Please note that The Institute will review your submission and determine what impact, if any, this will have on your application for the CHS designation for 2020.

Continuing Education

Have you completed the required 10 credits of CE for the 2019 Calendar year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If you have answered No, please provide a supplementary written explanation of why you were unable to meet the CE requirement for 2019. Please note that by answering no, there may be an impact on the renewal of your CHS for 2020.

2020 CHS Designation – Agreement and Terms

I hereby apply for the renewal of my CHS Designation for the 2020 year with The Institute commencing the signed date of this application. I agree to fulfill the ongoing requirements of maintaining my status as a CHS designation holder in good standing with The Institute for 2020. I hereby confirm that I have maintained the necessary requirements to maintain my standing as a CHS designation holder with The Institute for the 2019 year.

I understand that my submission of this renewal constitutes a 12-month agreement covering the period January 1, 2020, to December 31, 2020, and that, as a result, I am hereby committed to the payment of all fees associated with the CHS designation and its marks as well as their usage rights for the entire 12-month period. I understand that my failure to remit any portion of my full CHS fees at any time will impact my right to use the CHS marks and to hold myself out as a CHS designation holder. I understand that the enforcement of the CHS marks protects the reputations of the CHS designation and of CHS designation holders.

I agree to provide 60 days advance written notice to The Institute if I wish to cancel my CHS Designation Holder's Agreement with The Institute for the 2020 calendar year.

I have read and agree to abide by The Institute's Code of Professional Conduct & Disciplinary Procedures and understand that by entering into this Agreement for 2020, I am also subject to existing disciplinary procedures should a complaint involving allegations ever be filed against me with The Institute. I agree that The Institute has the right to enforce the Code of Professional Conduct against its designation holders.

I also hereby understand that I am required to maintain 10 hours of CE for the 2020 calendar year and may be selected by The Institute at random for a CE audit in 2021.

Printed Name _____ Advocis ID# _____

Signature _____ Date _____

Payment Information

TOTAL AMOUNT (including applicable taxes): \$

VISA MasterCard AMEX

ONE-TIME PAYMENT:

I authorize Advocis, on behalf of The Institute, to charge my credit card for the total fee

I enclosed the following Certified/Company Cheque or Money Order
(Payable to The Institute) for the total fee

Card No.

Expiry Date

MONTHLY PAP

I understand that my existing monthly PAP amount will increase due to the addition of the CHS Professional Fee. I authorize The Institute to increase my monthly dues.

Signature _____

Date _____

Send Completed Form To

Payments by cheque or credit cards can be submitted using this address or fax number:

Mail To: The Institute
10 Lower Spadina Avenue, Suite 600
Toronto, ON M5V 2Z2
Fax: 416.444.8031 **OR** **Email:** info@iafe.ca