

# 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\* \_\_\_\_\_ Gender Male  Female

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

### CONTACT DETAILS

Preferred email address\* \_\_\_\_\_

Other 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](http://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](http://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)	£ _____
<b>TOTAL PAYABLE</b>	<b>£ _____</b>

\*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): GB22 BARC 2017 9210 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.ac.uk](http://www.mylibf.ac.uk).

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