



## BECOME AN FPA AGED CARE SPECIALIST

**Becoming an Aged Care Specialist demonstrates that you have obtained your Accredited Professional status in Aged Care and are committed to ongoing continuing professional development to enhance and maintain your skillset. It represents a standard of excellence in the area of Aged Care.**

To obtain your designation you will need the following:

- Current Financial Planner AFP® or CFP® professional membership
- Completion of the Aged Care Accredited Professional program with Aged Care Steps. The Aged Care Steps Accreditation Refresh workshop and assessment will need to be completed if accreditation completed before 1 January 2019.

What to do now:

- Complete this application form
- Provide your Certificate of Completion from Aged Care Steps
- Have the form witnessed and supported by a CFP Professional.

Successful applicants will receive a confirmation letter, certificate, digital badge and designation usage guide from the FPA within two weeks of final assessment.

### PERSONAL DETAILS

You must be a current practitioner member of the FPA to apply to be an FPA Aged Care Specialist.

<b>FPA Member ID:</b>				<b>FPA Membership Category:</b>	
<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<b>Name:</b>	
<b>Address:</b>					
<b>Phone:</b>			<b>Email:</b>		
<b>Licensee/Dealer Group:</b>					

### RELEVANT EDUCATION/PROFESSIONAL DEVELOPMENT

- Certificate confirming achievement of Aged Care Accredited Professional dated 1 January 2019 or later is attached.

### EXPERIENCE DETAILS

Duration (yrs)	Role	Employer (AFSL)	Full time / Part time

## MEMBER DECLARATION

I, \_\_\_\_\_, hereby attest and declare that:

1. I satisfy the requirements for attaining the FPA Aged Care Specialist designation and am an FPA member in good standing.
2. This document is countersigned by a CFP® professional who personally knows me and supports me in this application.
3. I accept that the Aged Care Specialist mark and designation can only be held while remaining a practitioner member of the FPA (either Financial Planner AFP® or CFP® professional) or as otherwise determined by the FPA.

**Your signature:**

**Date:**

## CONFIRMATION BY A CFP® PROFESSIONAL

I personally know the above candidate and can attest to their meeting the requirements to become an FPA Aged Care Specialist.

I have known the candidate for \_\_\_\_\_ years. I have formed this view based on:

**Witnessed & supported by:**

**Signature:**

**Date:**

## PRIVACY STATEMENT

The FPA is committed to ensure the personal information of all members are collected, used, handled, stored and disclosed in compliance with the Privacy Act 1988 (Cth) (Privacy Act) and the Australian Privacy Principles (APPs). The FPA's Privacy Statement (also referred to as Privacy Policy) (available online at [www.fpa.com.au/privacy](http://www.fpa.com.au/privacy), or upon request) outlines the way in which the FPA will comply with the obligations under the Privacy Act, including an outline on the kind of personal information that will be collected and held, how personal information is collected and held, the purpose of the collection of personal information, how an individual can access personal information and the way in which the FPA will store and disclose personal information. In the course of FPA activities, the FPA collects and holds personal information. Please be aware that the main purposes for collecting that personal information include those set out in FPA's Privacy Statement. Please ensure that you read this Privacy Statement prior to completing this form.