

**Application for Supervisor under Supervised Work Experience Program of FPSB India**

I hereby apply for empanelment with Financial Planning Standards Board India (FPSB India) as a Supervisor under terms of reference issued Notification Ref. No. FPSBI/KM-OPR/03-01/2011 dated 21<sup>st</sup> March, 2011. I declare that I am in good standing as a CFP<sup>CM</sup> certificant with FPSB India for the previous three consecutive years. I further declare that I am competent to advise on all six components of Financial Planning (viz. Financial Management, Asset Management, Risk Management, Retirement Planning, Tax Planning and Estate Planning), having exclusively worked on these areas in the last two years. I submit below the categorical information for FPSB India to assess my eligibility for empanelment as a Supervisor under the Supervised Work Experience Program.

1. Name : \_\_\_\_\_

2. Whether Proprietor/Partner of a Firm, or  
Employed as a Financial Planner in a Firm 

Proprietor of a Firm	Partner in a Firm	Employed as a Financial Planner
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(Please ✓ appropriate status)

*In case of Partner, please attach Letter of Assent of other Partner(s) as Annexure-1  
In case of Employee, please attach Letter of Assent of the Proprietor/ Partner(s) as Annexure-1*

3. Designation : \_\_\_\_\_

4. Name of the Company/Firm : \_\_\_\_\_

5. Address of the Company/Firm : \_\_\_\_\_

City \_\_\_\_\_ PIN \_\_\_\_\_

State \_\_\_\_\_

6. Firm's Registration No. and date : \_\_\_\_\_

7. Number of branches : \_\_\_\_\_

8. Presence in the number of cities : \_\_\_\_\_

*Please attach a detailed list of branches with addresses with reference to 6&7 above, as Annexure-2*

9. Existing No. of employees in Office : \_\_\_\_\_

10. Office Infrastructure

a) Area (in sq. ft.) : \_\_\_\_\_

b) Capacity for no. of employees : \_\_\_\_\_

11. Number of years of experience : \_\_\_\_\_

*Please attach documents evidencing your experience as Annexure-3*

12. No. of clients currently serviced : \_\_\_\_\_

13. No. of Financial Plans prepared : \_\_\_\_\_

*(Prospective Supervisor may be asked to show the Plans prepared to the Panel of Experts appointed for empanelment by the Board)*

14. Any other parameter, in addition to the above, or excepting above which you believe merits your candidacy for mentorship

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Signature

Date

Seal

Email id

Business Telephone

Cell No.

Enclosures: