

MCSI Application for ICSI Members by Seniority, Experience & Professional Qualifications

- All questions to be answered and printed in ink and in block capitals
- Please remember to enclose all required documents and payment details
- Please refer to Notes for Guidance

1. Personal details	
Surname _____	
Forename(s) _____	
Title _____	Date of Birth _____
Home address _____ _____	
Postcode _____	
County _____	Country _____
Tel. _____	Mobile _____
Email _____	

2. Work details	
Firm name _____	
Job title _____	
Department _____	
Firm address _____ _____	
Postcode _____	
County _____	Country _____
Direct tel. _____	Direct fax _____
Mobile _____	Email _____

Please indicate where you wish correspondence to be directed to: Home Business

3. Career Details <i>(Please refer to Notes for Guidance)</i>	
Please indicate the number of years industry experience you have _____	
Your current employment if applicable <i>(*Please enclose a curriculum vitae)</i> _____	
Job Title _____	Date appointed _____
<i>*Please enclose a role profile/job description and organisation chart and indicate whether you are a Senior / Middle Manager as defined by your local regulator.</i>	

4. Professional Membership <i>(*Please enclose evidence of membership)</i>		
Please list membership of any other relevant organisations, including category of membership and year of entry. Examples of relevant organisations are: ICSI, Law Society		
Organisation	Category	Year of entry/Membership number
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Relevant Academic and Professional Qualifications <i>(*Please enclose evidence of qualifications)</i>		
Qualifications obtained: list relevant graduate and/or relevant qualifications include MSc, MBA, and any professional qualification giving title of qualification, place of study (institution) and year qualification achieved.		
Qualification	Place of study	Year of entry
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Please indicate any duties you have undertaken for the Institute or any relevant appointment you have held, or any further information which you consider relevant.

* The CISI reserves the right to seek independent verification of all the information supplied on this application form as part of the assessment process. The CISI reserves the right to refuse applications where information supplied is found to be false

Notes for Guidance

1. All applications will be based on a points system, which can be found overleaf. Please use this grid as guidance when applying.
2. As the scheme is aimed at senior professionals, the process has been designed to be rigorous but as streamlined as possible, making use of existing documentation already possessed by applicants.
3. **Senior or Middle Management Role:** In establishing your seniority, the CISI will be guided by your local regulators controlled functions (if applicable), your CV and the organisation chart submitted.
4. **Experience required:** Applicants will normally require a minimum of ten years experience in the industry, there are further points awarded for those with fifteen plus years experience.
5. **Relevance of Experience:** Your peers on the Membership Committee will be able to decide this, bearing in mind the full range of investment and securities related work, undertaken across the sector.
6. **Relevant Qualifications:** A copy of the certificate or other evidence will need to be attached with the application.
7. **CISI supporter:** The involvement with the Institute past or present that will be recognised includes committee work, exam panels, event speaker or exam writers.
8. **Sponsors of your application:** You are required to provide 2 sponsors one of which should be the Managing Director or CEO of your firm. Verification of ICSI membership details by ICSI will be treated as the 2nd sponsor to the applications. A brief statement from the sponsor supporting your application is required. If you cannot identify a suitable sponsor please email memberservices@cisi.org for advice.
9. **Fees:** Payment must be included with the application form before it can be processed.
10. **Payment methods:** Payment can either be made by attaching a cheque to the application form or including your credit card details.
11. Applications will normally take approximately one month to process, but may take up to 3 months after the application is received.
12. In the case of an appeal against the original decision, the application will be reviewed by the full Membership Committee and their decision is final.
13. Relevant documents that need to be included with your application are:
 - Curriculum Vitae
 - Evidence (or copy) of any relevant qualifications
 - Evidence of membership of relevant professional bodies/associations (membership number included in section 4)
 - Current job description/role profile
 - Current organisation chart
 - Statements of support from sponsors
 - Evidence of senior/middle management position

MCSI by experience (International Applicants) - Points system

Eligibility criteria	Points awarded	Actual Points
<i>Job Role:</i>		
Evidence of Senior Management Role, or	5	
Evidence of Middle Management Role	3	
<i>Experience:</i>		
15 years + relevant industry experience, or	5	
10 years + relevant industry experience	3	
<i>Relevant Qualification:</i>		
Degree level Qualification, or	2	
Other relevant local qualification	2	
Actively demonstrated presently or in the past support of the CISI (i.e. committee work, speaking at CISI events, exam writer, etc)	1	

Points system used by CISI

- 11 points or above Normally acceptable - formal ratification through Membership Committee
- 9 to 10 points Borderline case - referred to local advisory board for decision
- 8 points or below Not acceptable but offered ACSI if they meet requirements

**There is an alternative route to MCSI for CISI Diploma achievers and members of other recognised professional bodies.
 Please see our website or contact the Membership department for details of this.**

Your application will be treated in the strictest confidence.
 We look forward to receiving your completed application form.

Please fax or email pages 1 and 2 of this form to us at:

Facsimile: **+91 (22)4091 9499**
 Email : **ICSImembership@cisi.org**
 (and also copy **member@icsi.edu**)