

## Examiner Application Form (Financial Education)

Before completing and submitting this form, please make sure that you have read the **Examiner Recruitment Criteria** document. Please then return this form to **fcexaminers@libf.ac.uk**, along with a copy of your full CV.

YOUR DETAILS	
Name	Date of birth
Home address	
	Post code
Telephone number	Email
Current employment	
Areas of expertise (tick all relevant boxes)	
Retail banking	
Financial planning	
Accountancy	
☐ Entrepreneurship	
Citizenship	
Mathematics	
Economics	
Business studies	
Other areas of expertise (please specify)	
State which qualifications you are interested in working on (tick all relation)  Level 2 Certificate in Financial Education (CeFE)  Level 3 Certificate in Financial Studies (CeFS)  Level 3 Diploma in Financial Studies (DipFS)  Level 1/2 Technical Award in Finance (TAF)	Sievani Bones
AVAILABILITY - Include dates when you are / are not available	for work eg holidays, other work commitments, etc
Available	Not available

REFERENCES - Please provide the name and contact details of two references	
Reference 1	Reference 2
Name	Name
Address	Address
Postcode	Postcode
Telephone	
Email	
Further details, including your rights, the dican be found within our <b>Privacy Notice</b> (w	sclosure of data to third parties, storage, retention and how to amend your personal data, www.libf.ac.uk/privacy).
DECLARATION	
By sending us your application you declare use of your personal data as outlined in the	e that the information you have entered is true and accurate, consent to the processing and e <b>Privacy Notice</b> . I also confirm the following:  according to the Habituation of Offenders Act 1974.
I have no Disclosure and Barring Ser	rvice checks that have found an issue in respect of working with children.
I have no past or ongoing Safeguard	ding issues that have been raised about myself.
☐ There are no past or ongoing invest	igations, criminal or otherwise, that have been undertaken about myself.
Applicant name	Date