## APPLICATION TO ADD A QUALIFICATION TO AN **EXISTING PMI APPROVED CENTRE**



Pensions Management Institute ACHIEVING PENSIONS EXCELLENCE

Please refer to the Regulations and Guidance Notes for Centres, for the qualification you are wishing to add to your Centre.							
CENTRE DETAILS							
CENTRE NUMBER AND NAME							
ADDRESS							
CENTRE CONTACT							
QUALIFICATION(S) ALREADY OFFERED AT THIS CENTRE							
QUALIFICATION(S) TO BE ADDED TO THIS CENTRE							
PLEASE PUT A BRIEF OVERVIEW OF HOW YOU INTEND TO PROVIDE THE TRAINING AND ASSESSMENT REQUIRED FOR THIS QUALIFICATION.							
	QUALIFICATION TEAM						
NAME	PROPOSED ROLE IN TEAM	SIGNATURE					

## INVIGILATOR TEAM – EXAMINED UNITS ONLY

IF YOU INTEND TO OFFER VQ E OF YOUR PROPOSED INVIGILA		YOUR CAI	NDIDATES PLEASE EN	ITER THE NAMES
SIGNED				
NAME (IN BLOCK CAPITALS)				
POSITION IN ORGANISATION				
DATE				
COULD EVERYONE LIKELY TO E APPLYING TO RUN PLEASE BE		RUNNING	GOF THE QUALIFICAT	ION(S) YOU ARE
The Pensions Management Institu	te is registered under t	he Data Pr	otection Act and mainta	ins a database to:
Administer the qualifica Enable information to b		you and th	e Institute	
Information may be exchanged wit	h:			
Your centre personnel The external verifier as The relevant regulatory Regional groups		(if appropri	ate)	
QUALIFICATIONS	CONTACTS			
			FOR OFFICE USE ONI	LY
Please return this form to the relevan	t Qualifications Departm		DATE RECEIVED	
Vanessa Jackson			PIN NUMBER	
Manager of the Qualifications Team Tel: +44 (0) 20 7392 7422			INPUT BY	
Email: <u>VJackson@pensions-pmi.org</u>	.uk		CHECKED BY	
Rapinder Dhillon Qualifications Support (ADRP exams Tel: +44 (0) 20 7392 7436	)			
Email: <u>RDhillon@pensions-pmi.org.u</u>	<u>ik</u>		CENTRE CERTIFICATE ISSUED	
Qualifications Support (VQ exams) Tel: +44 (0) 20 7392 7402				
Email: TMakanjuola@pensions-pmi.c	org.uk			