



Declaration of Completion of CPD

Personal Details			
Title:	Mr / Mrs / Miss / Ms / Other:		
Surname:		Previous Surname:	
Forenames:		Known As:	
Date of Birth:			

PMI Membership			
Please give your membership number (if known):			
PIN:		Membership Grade:	

CPD Scheme			
Please enter the name of the body operating the CPD scheme you wish to use as a suitable alternative to the PMI's CPD scheme.			
Name:		CPD Year	

Declaration			
I declare I have met the requirements of the above CPD scheme. I understand the PMI may check compliance with the relevant body and that making a false declaration may result in disciplinary action.			
Signed:			

RETURN DECLARATION TO:	
The Pensions Management Institute, Membership Department membership@pensions-pmi.org.uk	

For Office Use Only:

Membership Number	Amount	Date Received