E-Portal Quick Guide –

Application for Assessment of Type 1 Qualified CPD Activities for Licensed Insurance Intermediaries (Structured and E-learning)

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1. Login to the e-Portal account

Step 1: Please go to https://eportal.hkcaavq.edu.hk/

Step 2: Click



The e-Portal has been developed to improve the efficiency of HKCAAVQ services by providing operators and course providers with a secure user-friendly online platform to process, check

The e-Portal provides for the following services:

and review the status of their applications and submissions.

- Accreditation for academic programmes
- · Accreditation for vocational programmes
- Assessment of Continuing Education Fund (CEF) reimbursable courses
- · Assessment of Continuing Professional Development (CPD) Programmes



e-Portal service will be launched soon.

Disclaimer Privacy Policy

Step 2: After reading the Disclaimer, click I Agree

Disclaimer

Whilst the Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAAVQ) endeavours to ensure the accuracy of the information on this website, the information is for reference only and is subject to change by HKCAAVQ at any time without prior notice. HKCAAVQ makes no warranties, representations and statements (whether express or implied) of any kind in relation to the information, including any warranties, representations and statements in respect of the accuracy, completeness, timeliness and fitness tor a particular purpose of the information. In or circumstances shall the information on this websites, and whether general or specific) or a subititue for such. This website is linked to websites set up by other organisations / bodies / companies. HKCAAVQ expressly states that it has not approved or endorsed the information provided by any other websites linked to this website and HKCAAVQ accepts no responsibility (howsoever cause) for such information. HKCAAVQ shall not in any circumstances or in any way be liable to any person (including any body of persons, corporate or unincorporated) for any loss or damage (including but not limited to consequential, indirect, incidental and special loss/damage) arising out of or in connection with its website or the websites which are linked to this website. Users are advised to verify the information available on or through this website (i.e. by making reference to original publications, legislations, etc.) and obtain independent professional advice (including professional legal advice) before relying or acting on any of the information.

Step 3: Enter the Username and Password, clik Login

中文 e-Portal
香港學術及職業資歷評審局 Hong Kong Council for Accreditation of Academic & Vocational Qualifications
Username: *
Password: *
Forgot Username or Password?
Login
Create New Account

1.1 Update "User Profile"

Step 1: Clic	User Profile				
香港學術及 Hong Kong	職業資歷評審局	Go Back	Welcome	│ 🖉 Logout │	中文
Academic &	Vocational Qualifications	User Profile Servic	e Review Application	System Administration	
User Profile					
Username:			Change Passwor	d	
Name: *	Ms	~			
	Title	Surname	First Nar	ne	

- Please update the Contact Persons and List of Addresses in "User Profile" before starting the application.
- Only when updated in "User Profile" can contact persons and addresses be shown in the application.

List of Addresses	
The list should include:	
1. Operator administrative address 2. Teaching venue	
Please update the address list before submitting application.	
Address	Capacity (For CPD only)
abc	100
	Deleti Add

Contact Persons

The contact in	The contact information of this account will not be automatically added into the list, please add to the list if needed.										
Title	Surname	First Name	Position	Phone No.	Fax No.	Email	Contact Address	Organisation (For CPD only)			
Dr	CHAN	Alan	Principal	12345678		info@abc.com.hk	abc				
Dr	CHAN	Cindy	Vice Principal	12345678	-	info@abc.com.hk	dfd	-			
Dr	CHAN	david	Manager	12345678	÷	info@abc.com.hk	dfd	-			
								Dolot			

2. Create New Application

Step 1: Click Create New Application

Hong Kong Council for Acen Academic & Vocational Qual	部局 見 Welc reditation of Ufications User Profi	ome CPDPUSER4 & Cogout				
v Application		•				
Application ID	Service	Туре	Scope / Course Title / Reference	Status	Last Update On 👻	Document Uploade
1600085	CPD	Re-assessment	-	Draft	19/05/2016	-
1600078	CPD	Change of Activity Information	-	Draft	17/05/2016	-
1600077	CPD	Change of Activity Information		Draft	16/05/2016	-
1600060	CPD	Change of Activity Information		Draft	11/05/2016	-
1600032	CPD	Change of Activity Information		Draft	10/05/2016	-
1600031	CPD	Change of Activity Information		Draft	10/05/2016	-
1600020	CPD	Re-assessment		Draft	06/05/2016	-
	CPD	Assessment	-	Draft	06/05/2016	-

Step 2: Click the pull-down button, select "Assessment of CPD Activity", then click Next



Step 3: After reading the Guidelines, please click

Guidelines for The Continuing Professional Development Programme for Insurance Intermediaries (for assessment, re-assessment and change application)

- 1. This online application is applicable for CPD activity organiser who wishes to offer CPD activities under the Insurance Intermediaries Quality Assurance Scheme (IIQAS)
- 2. Please read the Assessment Criteria for the CPD Programme with Fee Schedule available at www.hkcaavg.edu.hk before you fill-in the online application form.
- 3. Please fill-in the required information and upload the supporting documents when submitting the online application for IIQAS CPD services. The checklist of required documents can be found in the online application form

4. Please settle the assessment fee in accordance with the Fee Schedule. Payment methods are as follows:-

a. Bank deposit: please direct deposit the required assessment fee to Industrial and Commercial Bank of China (Asia) Limited a/c No. 072-881-502020073 (Hong Kong Council for Accreditation of Academic and Vocational Qualifications). Please upload the proof of payment with the online application form. b. By cheque: please send the cheque with the printout (after submitting the form) from the online application and made payable to "Hong Kong Council for Accreditation of Academic and Vocational Qualifications" by post.

5. A receipt will be issued to you once the HKCAAVQ confirms the payment

6. Please note that an application will not be processed if no payment and/or insufficient documents are received by the HKCAAVQ

- 7. You may edit the online application form in "My Application" of this e-portal if you wish. Once you press "submit", you cannot edit the information and the status of this application will show "Review by HKCAAVQ" in "My Application"
- 8. Upon receiving the required supporting documents and application fee, the HKCAAVQ will send you an acknowledgement email and start processing your application.
- 9. The status of your application could be checked in "My Application" of this e-portal

10. For enquiries, please contact the HKCAAVQ Secretariat at: 10 Siu Sai Wan Road Chai Wan, Hong Kong Tet: 3658 0000 Email: info@hkcaavq.edu.hk

By clicking Next, you agree to the above guideline.



3. Fill in the CPD Assessment Online Application Form

Tips:1. You may clickSave as Draftsaved and could be retrieved f	during the process. The application is temporation is temporation is temporation is temporation is temporation is temporation.	у
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Step 1: Fill in the necessary information

- For Structured Type 1 Qualified CPD Activity assessment applications, please state the Years of Experience in Organising the Structured CPD Activities or Related Activities
- For Type 1 Qualified E-learning Activity assessment applications, please specify the years of experience in organizing E-learning Programmes/CPD Activities

	on Form								
Click here to view the notes to activity organisers.									
Type of Application:	Assessment of CPD Activity	Created:	26/02/2020 10:24:50						
Status:	Draft	Last Update:	26/02/2020 10:24:50						
Application ID:	2000010	Submitted:	-						
Title of Activity:									
Title of Activity	English	Cł	ninese						
nformation about Activity Organiser									
Information about Activity Organis									

Name of Activity Organiser:	
Years of Experience in Organising the Structured CPD Activities or Related Activities (for E-learning CPD assessment applications, please specify the years of experience in organising E-learning Programmes/CPD Activities):	

Step 2: Fill in the information of Responsible Persons

- Click Add to add Responsible Persons, and then the box of "Select Contact Person" will be shown.
- Check the box next to the person you selected, click the pull-down button in the "Type", and click save. Please add new Contact Person in "User Profile". After completing the details in User Profile, the information of new Contact Person will be shown in the application.

í	First Nam	ne	Organisation	Position	Con	tact Phone No.	Fax No.	Email	Contact Address	
						No records found	1.			
		Select	Contact	Person					~	
		-								
		Please Disease	update in User	Profile if the Con	tact Person is r	not found or is ou	itdated.	Contact Barran	K	
		• Please	specily Head o	l Organisation / D	epartment, Pel	Contact	na Authonzea C	Jontact Person.		
		Title	Surname	First Name	Position	Phone No.	Fax No.	Email	Contact Address	
		Dr	Lee	Kuen Wai	Director	24567896	-	uat_cpd2@hkcaa vq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon	
		Mr	Wong	Ka Lee	Vice	24567896	-	uat_cpd2@hkcaa	-	
		🗆 Mr	Yip	Man Chuen	Manager	23456789	-	uat_cpd2@hkcaa vq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon	
		Type: *								
		1900.					~			1
									Cancel Save	
									Cancel Save	
									Cancel Save	
	ę	Select	Contact	Person					Cancel Save	
	S	Select	Contact	Person					Cancel Save	
		Select Please u	Contact	Person	act Person is	not found or is c	outdated.		Cancel Save	
	5	Select Please u Please s	Contact pdate in User I pecify Head of	Person Profile if the Cont Organisation / D	act Person is i	not found or is c	outdated. and Authorized	Contact Person.	Cancel Save	
		Select Please u Please sj Title	Contact pdate in User I pecify Head of Sumame	Person Profile if the Cont Organisation / D First Name	act Person is i epartment, Pe Position	not found or is c rson-in-charge Contact Phone No.	outdated. and Authorized Fax No.	Contact Person. Email	Cancel Save	
		Select Please u Please s Title Title	Contact pdate in User I pecify Head of Surname Lee	Person Profile if the Cont Organisation / D First Name Kuen Wai	act Person is i epartment, Pe Position Director	not found or is o rson-in-charge - Contact Phone No. 24567896	utdated. and Authorized Fax No. -	^I Contact Person. Email uat_cpd2@hkcaa vq.edu.hk	Contact Address Contact Address Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon	
		Select Please u Please sy Title Title Mr	Contact pdate in User I pecify Head of Sumame Lee Wong	Person Profile if the Cont Organisation / D First Name Kuen Wai Ka Lee	act Person is i epartment, Pe Position Director Vice President	not found or is c rson-in-charge Contact Phone No. 24567896	utdated. and Authorized Fax No. -	Contact Person. Email uat_cpd2@hkcaa vq.edu.hk uat_cpd2@hkcaa vq.edu.hk	Cancel Save X Contact Address Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon	
		Select Please u Please sy Title Title Mr	Contact pdate in User I pecify Head of Surname Lee Wong	Person Profile if the Cont Organisation / D First Name Kuen Wai Ka Lee	act Person is i epartment, Pe Position Director Vice President	not found or is c rson-in-charge c Contact Phone No. 24567896 24567896	utdated. and Authorized Fax No. -	Contact Person. Email uat_cpd2@hkcaa vq.edu.hk uat_cpd2@hkcaa vq.edu.hk	Cancel Save X Contact Address Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon - Room 2000, Tai	
		Select Please u Please s Title Title Mr Mr	Contact pdate in User I pecify Head of Sumame Lee Wong Yip	Person Profile if the Cont Organisation / D First Name Kuen Wai Ka Lee Man Chuen	act Person is i epartment, Pe Position Director Vice President Manager	not found or is c rson-in-charge d Contact Phone No. 24567896 24567896 23456789	outdated. and Authorized Fax No. - -	Contact Person. Email uat_cpd2@hkcaa vq.edu.hk uat_cpd2@hkcaa vq.edu.hk	Cancel Save Contact Address Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon - Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon Kowloon	
		Select Please u Please s Title Title Mr Mr Mr	Contact pdate in User I pecify Head of Surname Lee Wong Yip	Person Profile if the Cont Organisation / D First Name Kuen Wai Ka Lee Man Chuen	act Person is i epartment, Pe Position Director Vice President Manager	not found or is o rson-In-charge - Contact Phone No. 24567896 24567896 23456789	utdated. and Authorized Fax No. - -	Contact Person. Email uat_cpd2@hkcaa vq.edu.hk uat_cpd2@hkcaa vq.edu.hk uat_cpd2@hkcaa vq.edu.hk	Cancel Save Contact Address Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon - Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon Road, Mong Kok, Kowloon	

Steps 1-3: Information about the Activity

In	Information about the Activity							
1	Proposed Starting Date:	riii						
2	Target Participants:							
	□ In-house (employees of CPD Provider)	General Public	Employees of Commissioning Body					
	Others (Please specify):							
3	Number of CPD Hours Applied for:							

Step 4: Adoption of Virtual Classroom

✤ If the CPD activity would adopt virtual classroom, please provide details in the below:

4	Adop	tion of Virtual Classroom:	OYes	ONo	O N/A (e-learning activity)	notes and guideline	
	(a)	Maximum number of participants:					
	(b)	Has the application of virtual classroom been ap	proved ir	other ac	tivity(ies)?		
	0 Y	es, please provide the CPD Reference No. of the	latest ap	proved a	ctivity:		O No
	(C)	Ratio of administrators to participants:					
	(d)	Virtual Classroom delivery arrangement is not ap	plicable	to the mo	dule(s):		
							ĥ
	Asse	ssment Fee of Adoption of Virtual Classroom:			-		

Step 5: Modular Design

If the CPD activity has a modular design, please check the box "Yes", then fill in the information under "Add Module" and click Save

5	Modular Design:		
L	●Yes ○No	If "Yes", please specify the module(s) below	
	Module Title	Number of Hours	
		No records found.	
			Delete Add
		Add Module	
		Module Title: *	
		Number of Hours: *	7
		Cancel Save	

Steps 6-7: Duration, Aims and Objectives

Duration of Activity means the time required for completing the whole CPD activity.

6	Duration of the Activity:	
_	O days O weeks O months	
7	Aims and Objectives:	
		/

Step 8: Type of Activity

✤ Please refer to Guidance Notes for definition of Course, Seminars or Workshop.

8 Type of the Activity:

ullet If the CPD activity is "E-learning", please click "Other (Please specify)" and input "E-learning".					
OCourse	⊖Seminar	⊖Workshop	Others (Please specify):		

Step 9: Contents of Activity

- If the CPD activity is under the category of "Ethics or Regulations", please click "Ethics or Regulations (Please state "Ethics or Regulations" in the box below; or Other disciplines which are directly related to the work of insurance intermediaries (please specify)" and input "Ethics or Regulations".
- For a CPD activity to be approved under the category of "Ethics or Regulations", all the contents of the whole activity should be related to "Ethics or Regulations".

2. For a CPD ac Regulations".	ctivity to be approv	/ed under the ca	tegory of "Ethics or Regulations", all th	he contents of the whole activity should be related to "Ethic:
Local insurance legislation	e (or related)	□ Regulatory aspects of insurance practice in Hong Kong (but the activity is NOT under the category of "Ethics or Regulations")		
Insurance	🗆 Actuaria	l science	□ Risk management	Financial planning

If a CPD activity is under other category, please select appropriate discipline(s) or specify in the space provided (the contents should directly related to the work of insurance intermediaries).

	9	Contents of the Activity:						
		🐠 1. If the CPD activity is under the category of "Ethics or Regulations", please click "Other disciplines which are directly related to the work of insurance intermediaries (Please specify)" and input "Ethics or Regulations".						
		2. For a CPD ac Regulations".	0.2. For a CPD activity to be approved under the category of "Ethics or Regulations", all the contents of the whole activity should be related to "Ethics or Regulations".					
		□ Local insurance legislation	(or related)	□ Regulato "Ethics or Re	ry aspects of insurance practice in Hor egulations")	ng Kong (but the activity is NOT under the cate	gory of	
		Insurance	□ Actuarial	science	□ Risk management	□ Financial planning		
Ethics or Regulations (Please state "Ethics or Regulations" in the box below); or Othe intermediaries (Please specify):				disciplines which are directly related to the work	of insurance			
	⇒	e.g. Financia	Il Technology	/				

Step 10: Number of Participants per Activity

- For Structured Activity adopting virtual classroom, please input the maximum number of participants per activity for a face-to-face activity.
- For Structured Activity adopting virtual classroom <u>ONLY</u>, please input the maximum number of participants per activity for virtual classroon.

10	Number of Participa	nts per Activity:		
	(a) Minimum:		(b) Maximum:	

Step 11: Addresses of Teaching Venues

- For adding address(es), click Add and the address(es) you have entered in "User Profile" will be shown, then check the box next to Address, then click Add.
- Please add new address in "User Profile". After completing the details in User Profile, the information of new address will be shown in the application.

1	Addresses of Teaching Venues:	For new venue(s) not previously approved by HKCAAVQ, please ur plan(s), rental agreement(s) and insurance coverage for third party liable plan(s), rental agreement(s)	lload supporting documents such as floor vility.
	Venue Address		Venue Capacity
		No records found.	
			Delete
	Add Add	ress	×
	If you cannot f	ind your address(es) of teaching venue here, please add them in your user profile.	K
	Address	Capacity (for Cl	PD only)
	abc 🗹	100	
		C	ancel

Steps 12-15: Others Details of Activity

12	Spoken Language of D	elivery:		
	English	□ Cantonese	Putonghua	
13	Language of Printed M	aterials:		
	English	Chinese		
14	Frequency of the Activi	ty per Year:		
15	Are the participants of	CPD activity required to c	omplete any examination an	d/or continuous assessment?
	\bigcirc Yes (please comple	ete the following) The pas	sing mark:	○ No

Instructor Profile

For Structured Activity, please state the Minimum Appointment Criteria of Instructor.

Staff Profile

1 For Structured Activity, please state the Minimum Appointment Criteria of Instructor.

For E-learning Activity, please state the Minimum Appointment Criteria of E-learning Administrator/Instructor.

2 Person-in-charge:

(a) Name:

- (b) Position in the Organisation:
- (c) Full-time Position (if different from above):
- (d) Experience in Managing or Conducting the Training Course:
- (e) Academic Qualifications and Awarding Institutions:
- (f) Professional Qualifications and Awarding Institutions:
- Please upload the instructor list.

Quality Assurance

- For Structured Activity, please decribe the Quality Assurance Mechanisms such as internal course approval procedures, attendance monitoring procedure, class observation(s), review meeting(s) on monitoring the CPD activity and follow up participants' feedback.
- For Structured Activity adopting virtual classroom, please also provide the description of Quality Assurance Mechanisms such as the implementation of virtual classroom, attendance monitoring procedure, review meeting(s) on monitoring the CPD activity and follow up participants' feedback.
- If the content exceeds the word limit, you may provide this information as attachment.

Quality Assurance

Any learning activities to meet the aims and objectives?

Quality Assurance Measures. (e.g. attendance monitoring procedures, participant evaluation, class observation, review meeting, train the trainer, etc):

Fees and Refund

✤ Please provide the fees and refund arrangement of the Activity.

Fe	es and Refund				
1	Free of charge	Fee paid by organisation	Fee paid by participants	s	
2	Any other miscellaneous fees?				
	● Yes O No	If yes, please provide the details below.			
	Item			Amount	
			No records found.		
		Add Miscellar	neous Fee	×	Delet Add
		ttem; * Amount: *			
				Cancel Save	

Upload Supporting Documents

Step 1: Please downlaod the checklist by clicking checklist. to check what kinds of relevant documents are needed.

- For Structured Activity, please refer to the Supporting Document Checklist of Application for Assessment of Structured Type 1 Qualified CPD for Licensed Insuracne Intermediaries for preapering the documents.
- The duly completed checklist should be uploaded (as Attachment 13) together with the documents.

ent Type	File	Name	Uploaded Date / Time			
			lated documents uploaded.			
	\checkmark				Delete	
Δ	Application for ssessment of Structured Type 1 Qualified CPD Ac for Licensed Insurance Intermediaries	tivity		venue, please check the box "not applicable". (*applicable to new venue(s) not previously approved by HKCAAVOD.		
ase prepare vide the fol essment out	Supporting Document Checklist and upload the following documents to support your ap owing documents may delay the assessment proce come.	plication. Failure to ss and affect the	7.	Profiles of all instructors or presenters including their academic and professional qualifications, and training/industry experience.	□ yes	
ase indicate oaded (as At	the availability of the documents. The duly completed tachment 13) together with the documents.	checklist should be	8.	Sample End-of-Activity Participant Evaluation Form.	🗆 yes	
ttachment No.	Documents to be u'sloaded	Availability	9.	Sample attendance certificate issued to the CPD participants	U yes	
1.	Background information about the CPD Activity Provider with organisational chart. (* applicable to first time application / If there are any updates)	□ yes* □ not applicable	10.	Description of Quality Assurance Mechanisms such as internal course approval procedures, attendance monitoring procedure, class observation(s), review meeting(s) on monitoring the CPD activity and follow-up participants' feedback.	☐ yes ☐ already stated in the Online Application Form	
2.	Information of similar activities offered in the past For application involving virtual classroom, please also provide track records showing at least one qualified CPD activity had completed HKCAAVQ's Reassessment.	□ yes* □ not applicable		For Structured Activity adopting virtual classroom, please also provide the detailed arrangements of virtual classroom as a delivery mode, e.g. specific attendance monitoring system, policies / guideline / methods for maintaining integrity and security of participants' data		
	(*applicable to first time application/ If there are any updates)		11.	Description of Technical Support Services (*applicable to Structured Activity adopting virtual classroom)	□ yes* □ not applicable	
3.	Copy of Business Registration (BR) / Certificate of Incorporation (CI) (* applicable to first time application/ If there are any updates including the expiry date showed in the BR or Ch	□ yes* □ not applicable	12.	Sample of assessment paper (Exam or Test) with assessment criteria. (*Where applicable)	□ yes* □ not applicable	
4.	Lesson Plan with Hourly Breakdown, For CPD activity adopting modular design, an outline of all modules including module title, CPD hours, contents and number of modules should be clearly specified.	U yes	13.	Completed Document Checklist END -	□ yes	
5.	A full set of course materials, seminar handouts, or seminar papers.	□ yes				
6.	Floor plan(s), rental agreement(s) and insurance coverage for third party liability and / or other possible evidence of activity venue For Structured Activity adopting virtual classroom	□ yes* □ not applicable				

Step 2: Click Upload Documents , then click Select Files

You may put a number of files together into a compressed folder (e.g. zip, rar, 7z) to upload the document in one go.

internet according to the enecklist. I		
	File Name	Uploaded Date / Time
	No related doct	iments uploaded.
Upload Do	cuments	×
Document Type	* Supporting Document	v 4
File Name: *	Select Files	
		Cancel Upload
Vhan tha fila		Cancel Upload
Vhen the file	(s) are ready for upload	Cancel Upload
Vhen the file	(s) are ready for upload	Cancel Upload
Vhen the file	(s) are ready for upload,	Cancel Upload
Vhen the file	(s) are ready for upload	Cancel Upload
Vhen the file Upload Docu	(s) are ready for upload, ments	Cancel Upload
Vhen the file Upload Docu Document Type: *	(s) are ready for upload, ments	Cancel Upload , Click Upload *
Vhen the file Upload Docu Document Type: * File Name: *	(s) are ready for upload, ments Supporting Document	Cancel Upload
Vhen the file Upload Docu Document Type: * File Name: *	(s) are ready for upload, ments Supporting Document Select Files Lesson Plan.pdf (79KB)	Cancel Upload

3.2 E-learning Activity

Steps 1-3: Information about the Activity

In	Information about the Activity					
1	Proposed Starting Date:	(iii				
2	Target Participants:					
	□ In-house (employees of CPD Provider)	General Public	Employees of Commissioning Body			
	Others (Please specify):					
3	Number of CPD Hours Applied for:					

Step 4: Not applicable for e-learning CPD activity

✤ Please select "N/A (e-learning activity)" for E-learning CPD activity.

4	Adop	tion of Virtual Classroom:	⊖Yes	○ No ○ N/A (e-learning activity)	notes and guideline	
	(a)	Maximum number of participants:				
	(b)	Has the application of virtual classroom been ap	proved ir	in other activity(ies)?		
	0 Y	es, please provide the CPD Reference No. of the	latest ap	pproved activity:	○ No	
	(c)	Ratio of administrators to participants:				
	(d)	Virtual Classroom delivery arrangement is not a	pplicable	e to the module(s):		
						li.
	Asse	ssment Fee of Adoption of Virtual Classroom:		-		

Step 5: Modular Design

If the CPD activity has a modular design, please check the box "Yes", then fill in the information under "Add Module" and click Save

5	Modular Design:		
	●Yes ○No	If "Yes", please specify the module(s) below	
	Module Title	Number of Hours	
		No records found.	
			Delete
		Add Module	
		Module Title: *	j
		Number of Hours: *]
		Cancel Save	-

Steps 6-7: Duration, Aims and Objectives

Duration of Activity means the time required for completing the whole CPD activity.

6	Duration of the Activity:
	⊖ days ⊖ weeks ⊖ months
7	Aims and Objectives:

Step 8: Type of Activity

- For e-learning CPD activity, please select "Others (Please specify)" and fill in "Elearning".
 - 8 Type of the Activity:

If the CPI	D activity is "E	-learning", pleas	e click "Other (Please specify)" and input "E-learning".
OCourse	⊖Seminar	○Workshop	Others (Please specify):
E-learning			

Step 9: Contents of Activity

- If the CPD activity is under the category of "Ethics or Regulations", please click "Ethics or Regulations (Please state "Ethics or Regulations" in the box below; or Other disciplines which are directly related to the work of insurance intermediaries (please specify)" and input "Ethics or Regulations".
- For a CPD activity to be approved under the category of "Ethics or Regulations", all the contents of the whole activity should be related to "Ethics or Regulations".

9	Contents of the Activ	vity:			
	1. If the CPD acti intermediaries (Pleating)	ivity is under the o se specify)" and i	ategory of "Ethi nput "Ethics or I	ics or Regulations", please click "Othe Regulations".	r disciplines which are directly related to the work of insurance
	2. For a CPD acti Regulations".	ivity to be approve	ed under the cat	tegory of "Ethics or Regulations", all th	ne contents of the whole activity should be related to "Ethics or
	□ Local insurance (legislation	(or related)	□ Regulatory "Ethics or Reg	y aspects of insurance practice in Hor gulations")	ng Kong (but the activity is NOT under the category of
	□ Insurance	□ Actuarial	science	□ Risk management	□ Financial planning
\Rightarrow	Ethics or Regulat intermediaries (Plea	tions (Please stat ise specify):	e "Ethics or Reg	gulations" in the box below); or Other o	disciplines which are directly related to the work of insurance
\Rightarrow	Ethics or Regulation	ns			

If a CPD activity is under other category, please select appropriate discipline(s) or specify in the space provided (the contents should directly related to the work of insurance intermediaries).

9	Contents of the Activ	ity:				
	1. If the CPD active intermediaries (Please)	vity is under the o se specify)" and i	ategory of "Eth nput "Ethics or	ics or Regulations", please click "Oth Regulations".	er disciplines which are directly related to the work o	of insurance
	2. For a CPD activ Regulations".	vity to be approv	ed under the ca	tegory of "Ethics or Regulations", all	the contents of the whole activity should be related to	o "Ethics or
	□ Local insurance (legislation	or related)	□ Regulator "Ethics or Re	y aspects of insurance practice in Ho gulations")	ng Kong (but the activity is NOT under the category	of
	□ Insurance	Actuarial	science	□ Risk management	Financial planning	
	Ethics or Regulati intermediaries (Pleas	ions (Please stat se specify):	e "Ethics or Reo	gulations" in the box below); or Other	disciplines which are directly related to the work of i	nsurance
	e.g. Financial	Technology	/			

Step 10: Number of Participants per Activity

Please provide the maximum number of participants who can join the activity platform at the same time.

10	Number of Participa	ints per Activity:		
	(a) Minimum:		(b) Maximum:	

Step 11: Addresses of Teaching Venues

- Applicant to e-learning CPD activity that need to conduct the face-to-face end-ofactivity or end-of-module assessment only: For adding address(es), click Add and the address(es) you have entered in "User Profile" will be shown, then check the box next to Address, then click Add.
- Please add new address in "User Profile". After completing the details in User Profile, the information of new address will be shown in the application.

11	Addresses of Teaching Venues:	For new venue(s) not previously approved by HKCAAVQ, please u plan(s), rental agreement(s) and insurance coverage for third party lia	nload supporting documents such as floor bility.
	Venue Address		Venue Capacity
		No records found.	
			Delete
	Add Addr	ess	×
	If you cannot fin	d your address(es) of teaching venue here, please add them in your user profile.	K
	✓ Address	Capacity (for C	PD only)
	abc	100	
		C	ancel

Steps 12-15: Others Details of Activity

12	Spoken Language of D	elivery:		
	English	□ Cantonese	Putonghua	
13	Language of Printed M	aterials:		
	English	Chinese		
14	Frequency of the Activi	ty per Year:		
15	Are the participants of	CPD activity required to c	complete any examination a	and/or continuous assessment?
	\bigcirc Yes (please comple	ete the following) The pas	sing mark:	○ No

Instructor Profile

For E-learning Activity, please state the Minimum Appointment Criteria of Elearning Administrator/ Instructor.

Staff Profile

1 For Structured Activity, please state the Minimum Appointment Criteria of Instructor.

For E-learning Activity, please state the Minimum Appointment Criteria of E-learning Administrator/Instructor.

2 Person-in-charge:

(a) Name:

- (b) Position in the Organisation:
- (c) Full-time Position (if different from above):
- (d) Experience in Managing or Conducting the Training Course:
- (e) Academic Qualifications and Awarding Institutions:
- (f) Professional Qualifications and Awarding Institutions:
- Please upload the instructor list.

Quality Assurance

- Please describe Quality Assurance Mechanisms such as development, approval and review of e-learning activities, measures to review and ensure quality delivery; roles and responsibilities of involved personnel; follow up on participants' feedback.
- If the content exceeds the word limit, you may provide this information as attachment.

Quality Assurance

Fees and Refund

✤ Please provide the fees and refund arrangement of the Activity.

Fe	es and Refund				
1	Free of charge	Fee paid by organisation	Fee paid by participants	S	
2	Any other miscellaneous fees?				
	● Yes ○ No	If yes, please provide the details below.			
	Item			Amount	
			No records found.		\sim
		Add Miscellan	eous Fee	×	Dele Add
		Item: * Amount: *			
				Cancel	

Upload Supporting Documents

Step 1: Please downlaod the checklist by clicking checklist. to check what kinds of relevant documents are needed.

- For E-learning Activity, please refer to the Supporting Document Checklist of Application for Assessment of Type 1 Qualified E-learning Activity for Licensed Insuracne Intermediaries for preapering the documents.
- The duly completed checklist should be uploaded (as Attachment 14) together with the documents.

			File I	Name	No related o	locumente i	uploaded	Uploaded D	ate / Time		
					No related (locuments	upioaueu.				Dele
			\checkmark								
	Accessment of Typ	e 1 Gualified E-I	earning Activity	Γ			materiais (e.g. text / narration / multi-media)				parts of the instruction materials. E-learning
Pleas	Supportin e prepare and upload the following the following documents ma	a Document Ch ng documents to ny delay the as:	exilist support your application. Failure to essment process and affect the				contents. (Por example, 1920 – 342° of a video embedded in session #1 is related to topic A); o information (such as				provide related informa such as the system der built-in functions for the above purpose for assessment.
Pleas upica	sment outcome. e indicate the availability of the o ded (as Atlachment 14) together	iocuments. The o	duly completed checklist should be g documents.				purpose design and implementation) about activities / mini games / questions (or any other forms of components)				 When applying for assessment of E-learn Activities for the first ti learning Activity Provid
No.	Documents to be uploaded	Availability	Supplementary Information for E-learning Activity Providers				adopted as learning reinforcement (not EoA / EoM assessment), at the end of each topic, if any; 2 "Direct addition topic,				should provide the Assessment Authority access right to the e- learning platform / lear management surface
	the E-learning Activity Provide with organisational chart. ("applicable to first time	not applicable					participants could resume their learning after logout.				through which the E- learning Activities are delivered; with the act right granted, the
2.	approach of E-earning Activity / If there are any updates) Information of organising E- learning programmes / CPD activities.	□yes' □not	 E-learning Activity Providers are to demonstrate their capabilities and capacities 				adopting includar design, the activity plan should further include the linkage and sequences / pre- regulate between modules,				should have the liberty review any parts of the instructional materials
	("applicable to first time application of E-learning Activity If there are any updates)	applicable	for conducting E-learning Activities through track records of conducting similar activities, e.g. experiences in designing / delivering /	5.	A fuil set of instructional materials, e.g. lecture notes, PowerPoint sides,	O yes	where appropriate. E-learning Activity Providers should indexthe instructional materials		 Floor plan, rental agreement, Insurance coverage for third party liability and/or other possible ev/dence of activity venue. 	 yes' not applicable 	E-learning Activity Pro who do not adopt a tw factor authentication s require the participant undertake the end-of-
1	Copy of Business Registration (BR) / Certificate of	O yes'	administering e-learning activities. > NA		transcription of voice-overs (if applicable) and digital media.		submission with an easy-to- read and consistent system and clearly indicate their sequence / mapping with the corresponding topics /		("applicable to E-learning Activities with a designated assessment versue)		module (EoM), end-of activity (EoA) assess the entire E-learning A in person at a designa venue provided by the
	Incorporation (CI) (*applicable to first time application / If there are any updates including the explining date	not applicable					contents in the Activity Plan. > The instructional materials submitted for assessment should be in the formals that				 The venue setting sho suitable and in accord with the design of the
4	aboved in the BR or CI) Activity Plan with detailed breakdown; For E-Learning activity adopting modular design, an outline of all	D yes	 An Activity Plan for E- learning Activities should include, but not limited to the following: 				allow the Assessment Authority to review any particular parts of the content in the process.		Description of secured login	O ves	EoM assessment or th learning Activities as appropriate.
	modules including module stees, CPD hours, contents and number of modules should be clearly specified.		 Learning sequence / flow of topics / contents through which participants should be able to attain the stated objective of the 				 However, when the E- learning Activities are actually delivered, participants should be presented from should be 		and identity authentication system adopted	approved in	conducted in an unsupervised environ the E-learning Activity Providers should provi detailed decordings as
			E-learning Activities; o Mapping of instructional				fast-forwarding through any			E-learning	screen dumps about th
	1	Activity	login procedures / steps,	E.			through which the E-			1	enquiry, etc.
		application	Including, but not iinited to - o Identity authentication method(s)/ technologies adopted for the secured login system				learning Activities are delivered; with the access right granited, the Assessment Authority should be able to test the				 Availability of the se (e.g. office hours on weekdays or 24 hou day 7 days a week, and the service lear
			Measures / procedures to prevent impostance, if appropriate Continual authentication measures during the E-				secured login and identity authentication system. If the secured login and identity authentication				In normal circumsta Nevertheless, the o support services sh be provided as soo practicable or within
			learning Activities and before EGA/ EGM assessment to prevent impersonation. For every 30-minute, the				system adopted for the E- learning Activities applying is the same as that has already been approved in other E-learning Activities,				 next working day, a latest. Roles and responsi of respective techni personnel.
			participants should be required to autheriticate themselves at least once. They should also be required to do so before				the E-learning Activity Providers should totk the box "already approved in previous E-learning Activity application" and is not				 Selection criteria fo selection of externa service providers, a appropriate.
			 Declaration by the participants to the effect that they are warned and given to understand the 	8.	Profiles of all E-learning administrations / instructors	D yes	required to submit the Information again. ➤ E-learning Administrators / Instructors should possess				 If the technical support services information ft E-learning Activities applying is the same a have already been applying is the same a
			consequences of impersonation or any incidents of allowing impostors to take the E- learning Activities.		Including their academic and professional qualifications, and training industry experience.		academic and/or recognized professional qualifications relevant to the contents of the E-learning Activities; plus an appropriate level of				in other E-learning Activity Providers should tick to box "aiready approves previous E-learning A
			 If a two-factor authentication is adapted, the two authentication methods adapted should be different. 		Sample End-of-Activity	C yes	expertence in designing, developing, managing or delivering elearning.	1	1. Sample attendance certificate	C yes	application" and is not required to submit the information again. > NIA
			 If One-Time-Password (OTP) is adopted as an authentication method, using an e-mail to receive 	10	Participant Evaluation Form	D yes	In electronic or hard copy format. ➤ E-learning Activity Providers can appoint In-house	1	2 Description of Quality Assurance Mechanisms such as the procedures for the	⊂ yes ⊂ already	Where revision / updat the E-learning Activitie involve an external patients
			the OTP is currently accepted. > When applying for assessment of E-learning		roles and responsibilities of respective technical personnel and a range of services provided by different technical	approved in previous	technical personnel or external service providers for the technical support services.		development, approval and review of E-learning Activities measures to review activity content and monitor e-learning	stated in the Online Applicatio n Form	such as an e-learning platform service provid the quality assurance mechanism should als include the communic
			Activities for the first time, E- learning Activity Providers should provide the Assessment Authority with assessment of the law		versonne and the selection criteria for external service providers	Activity application	 There should include, but not limited to the following information - Technical support 		administrators/instructors/ performance and review meeting(s) on monitoring the CPD activity and follow up users' feedback.		channels and approve procedure concerning the internal and exten parties.
			learning platform / learning management system				servicet available to participants such as troubleshooting, online				 Completion rate in E- learning Activities refe the percentage of enrich

You may put a number of files together into a compressed folder (e.g. zip, rar, 7z) to upload the document in one go.

Supporting Docun	nent(s)		
Please upload supporting docu	ments according to the checklist. The template	of instructor list is available here	
Document Type		File Name	Uploaded Date / Time
		No related documents uploaded.	Delet Upload Documents
	Upload Docume	ents	×
	Document Type: *	Supporting Document	
	File Name: *	Select Files	
			Cancel Upload

Step 3: When the file(s) are ready for upload, click Upload

Upload Docume	ents	
Document Type: *	Supporting Document	
File Name: *	Select Files	_
	Lesson Plan.pdf (79KB)	
		Cancel

4. Payment

- If you wish to pay by cheque, please send the cheque with the printout of application available after pressing "Submit Application"
- If you select to settle the payment by bank deposit, please upload the proof of payment with the following steps

Step 1: Please select the Payment Method by clicking the pull down button



- Step 4: If you would like to apply for an Express Service, please click "Apply for an Express Service", then click
 - Additional fee should be paid on top of the original assessment fee at the time when the express service application is accepted by HKCAAVQ.

Payment			
Assessment Fee:	\$8,000.00	Payment Method:	
Apply for an Express Se	rvice		
If you select to settle the pa	ayment by bank deposit, please upload the proof of paymen	nt. If you wish to pay by cheque, please send the cheque with the	printout available after pressing 'Submit Application' to HKCAAVQ.
Proof of Payment:	-		
Choose File to Upload:	Select File		
	Message from webpage		×
	Additional fee should the time when the exp	be paid on top of the original assessme press service application is accepted by	ent fee at HKCAAVQ.
			ОК

5. Submit Application

Step 1: Click Download Application Form , select your preferred Language and click Download The completed form will be shown for your own record.

Declaration





Step 3: The message from webpage will be shown, please read the message and click

ОК	Message from webpage	×
	You will not be allowed to make further changes once the application is submitted. Click OK to proceed or Cancel to edit your application.	
	ОК Салсеі	

Step 4: The application has been submitted successfully. *If you wish to pay by cheque, please print this page together with the cheque and send to HKCAAVQ.* If you want to edit your application, Click Back

Submit Application				
The online application was submitted successfully.				
Application ID:	1600100	Submitted:	24/05/2016 16:25:24	
				Back Print

Step 5: The application you submitted to HKCAAVQ will be shown under "My Application". The status of the application will be changed to "For Review by HKCAAVQ".

My Application						
Application ID	Service	Туре	Scope / Course Title / Reference	Status	Last Update On 🗸	Document Uploaded
1600100	CPD	Assessment	aaa	For Review by HKCAAVQ	24/05/2016	0

6. Special Function

The following functions are under the page of "My Application".



6.1 View Closed Applications

Step 1: (Click	View Closed Applications	, you may review th	ne completed a	application(s)
My Application						
Application ID	Service	Туре	Scope / Course Title / Reference	Status	Last Updated	Document Uploaded
☑ 1600002	CPD	Change of Activity Information	-	Draft	26/05/2016	-
Closed Applic	ation			View Closed Applications Delete Select	ed Applications Copy as New Applic	ation Create New Application
Application ID	Service	Туре	Scope / Course Title / Reference	Status		Last Updated
			No records found.			
					[Back Copy as New Application

6.2 Delete Selected Applications

Step 1: Check the box next to the application ID, click	Delete Selected Applications	, and the
application you have selected will be deleted		

My Application	ı						
Application ID	Service	Туре	Scope / Course Title / Reference	Status	La	ast Updated	Document Uploaded
1600002	CPD	Change of Activity Information	-	Draft	26	6/05/2016	
My Applicatior	1			View Closed Applications	Delete Selected Applications	Copy as New Application	Create New Application
Application ID	Service	Туре	Scope / Course Title / Reference	Status	L	Last Updated	Document Uploaded
			No records found.				
				View Closed Applications	Delete Selected Applications	Copy as New Application	Create New Application

Step 1: Check the box next to the application ID, click Copy as New Application , the information of the selected application(s) will be copied with different Application ID.

Application ID	Service	Туре	Scope / Course Title / Reference	Status	Last Updated	Document Uploaded
1600002	CPD	Change of Activity Information	-	Draft	26/05/2016	-
				View Closed Applications Delete Select	ed Applications Copy as New Applica	tion Create New Applicat
						/
					\checkmark	
ly Application						
	Service	Туре	Scope / Course Title / Reference	Status	Last Updated 🗸	Document Upload
Application	Service CPD	Type Change of Activity Information	Scope / Course Title / Reference a	Status Draft	Last Updated + 26/05/2016	Document Upload
Application ID Application ID 1600003 1600002	Service CPD CPD	Type Change of Activity Information Change of Activity Information	Scope / Course Tille / Reference a a	Status Draft For Review by HKCAA	Last Updated Υ 26/05/2016 /Q 26/05/2016	Document Upload - -

Step 2: Click the Application ID, and you may edit the necessary information for submitting another application(s)

My A	pplication									
Ap	plication ID	Service	Туре		Scope / Course Title / F	Reference	Status		Last Updated 🐱	Document Uploaded
		CPD	Change of Activity Information	tion	а		Draft		26/05/2016	-
160	00002	CPD	Change of Activity Information	tion	а		For Review	by HKCAAVQ	26/05/2016	-
		4					View Closed Applications	Delete Selected Application	S Copy as New Application	Create New Application
CPD Asses	sment Online Chan	ge Application Form								
Click here to view th Type of Application:	e notes to activity organisers.	Cha	ange of CPD Activity		Cr	reated:	28/05	5/2016 14:44:48		
Status:		Dra	ŧ.		La	ist Updated:	26/05	5/2016 14:44:48		
Application ID:		160	0003		Si	ubmitted:	•			_
CPD Ref. No.:	janiser.	10	source of Financial Planners of Hong Kong							×
Title of Activity:		8	102102							
		Eng	jish				Chinese			
Details of P	roposed Changes									
Category		c	Change from		Change to		Effective Date	e Re:	ason(s)	
CPD Hours		1			2		02/05/2018	mo	re ppl	
Responsible	e Persons									Delete Add
Title	Sumame	First Name	Organisation	Position	Contact Phone No.	Fax No.	Email	Contact Address	Type	entration (December 201
	a	a	-			-			Head of Org Person-in-c	anisation / Department harge
D Ir	b	b			-	-	÷		Authorised	Contact Person
Supporting	Document(s)									Delete Add
Please upload supp	orting documents according to th	e checklist.	The Marc				Internal Parts	- 17		
Document Type			File Nat	12 	No related documen	ts uploaded.	Opioaded Date	e/ lime		
Doclaration										Delete Upload Documents
Deciaradon										
I will abide by HKCA payable in advance A person who, either I agree with the a Submit Application Download Complete	AVC2 Assessment Criteria, and d to the Yong Kong Council for Ac r orally or in writing, makes any s bove declaration ed Application Form for Your Own	eclare that all the information provided in creditation of Academic and Vocational Q tatement or representation or furnishes ar Record	the application form is accurate to the best of my suffications', ny information to HKCAAVQ in connection with the	knowledge. I understand and accept that	t HKCAAVQ may approach us direct for fur DAAVQ Ordinance (Chapter 1150) which th	ther information regarding the application	on. I also understand and accept that a non-refundab know is misleading or false in a material respect cor	le assessment fee is charged for the assess	sment work irrespective of the assessment to a fine at level 5.	outoome, and the fees should be made

Back Save as Draft

7. Points to Note

- The Quick Guide aims to provide a step-by-step guidance for using the e-Portal service. Before submitting the application(s), you should read the related Guidance Notes on Assessment of CPD Activities with Fee Schedule on the HKCAAVQ website at https://www.hkcaavq.edu.hk/en/services/assessment/cpd-ia-programmes
- For enquiries, please contact:

Assessment and Vetting of CPD Activities for Licensed Insurance Intermediaries

Contact person: Ms Ann LAM Telephone: 3658 0137 Email: <u>cpd_ia@hkcaavq.edu.hk</u>