E-Portal Quick Guide –

Application for Re-assessment of Type 1 Qualified CPD Activities for Licensed Insurance Intermediaries (Structured and E-learning)
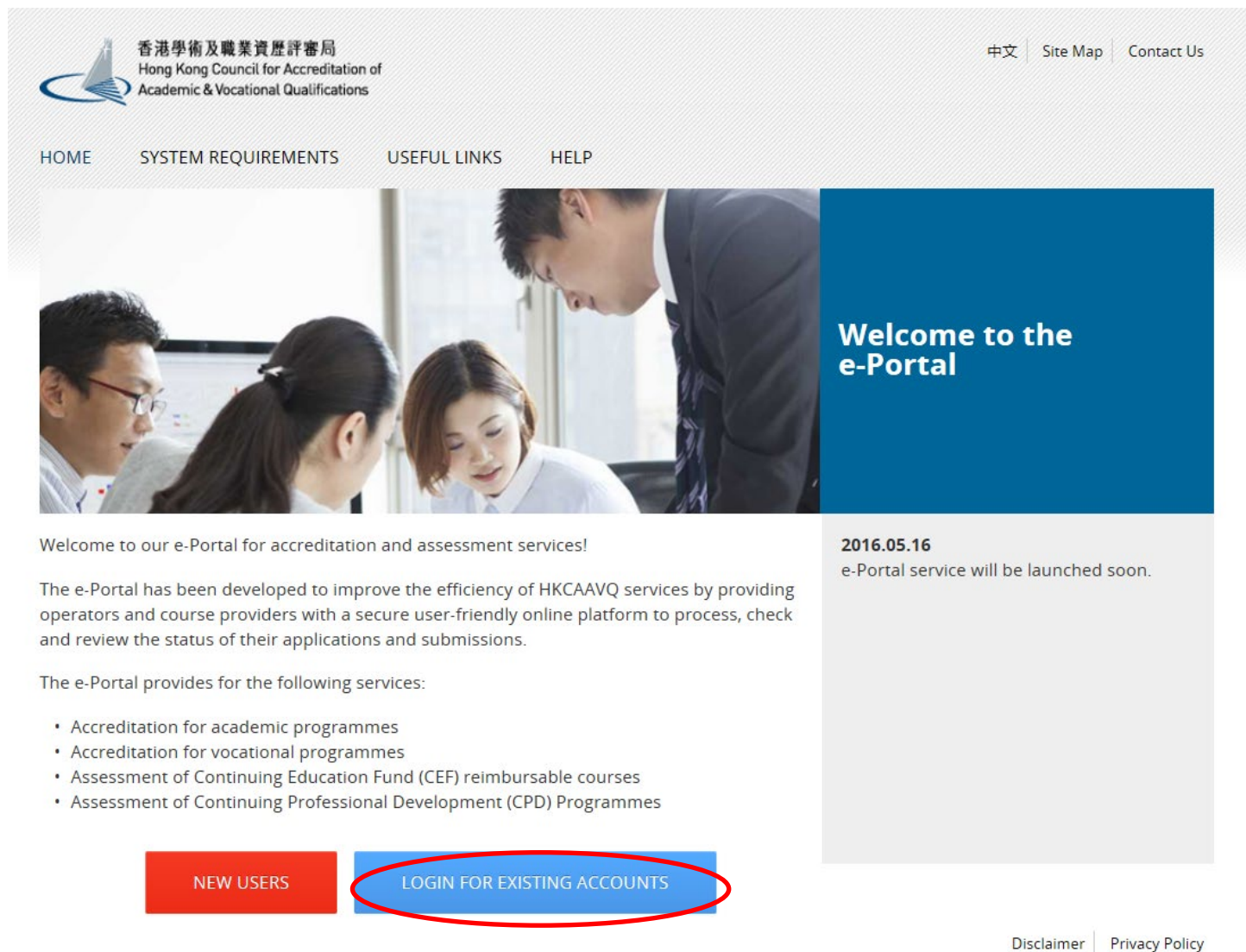
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1. Login to the e-Portal account

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

Step 2: Click LOGIN FOR EXISTING ACCOUNTS

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 for a particular purpose of the information. In no circumstances shall the information (or any part thereof) be regarded as professional advice (whether legal or otherwise; and whether general or specific) or a substitute for such.
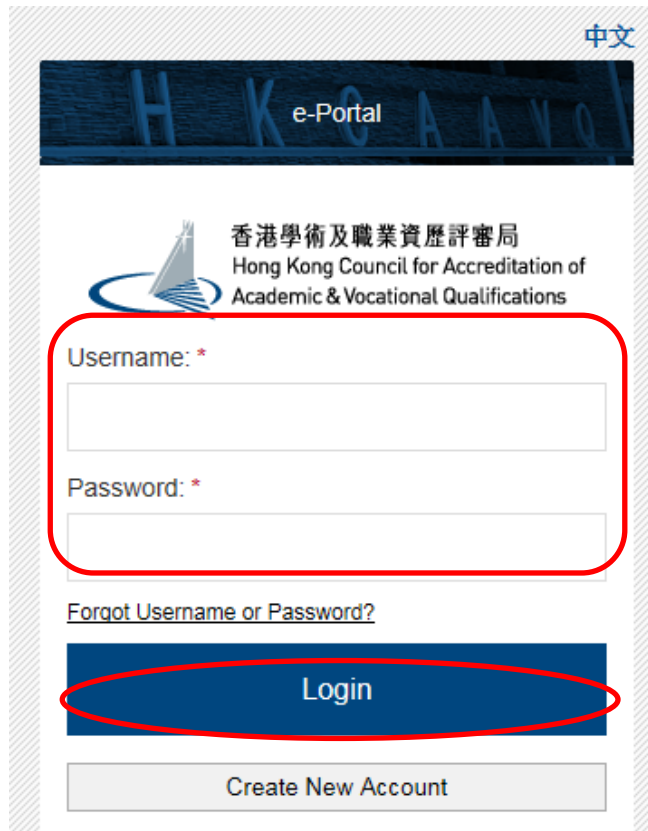
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[I Agree]

Step 3: Enter the Username and Password, click [Login]

1.1 Update "User Profile"

Step 1: Click User Profile
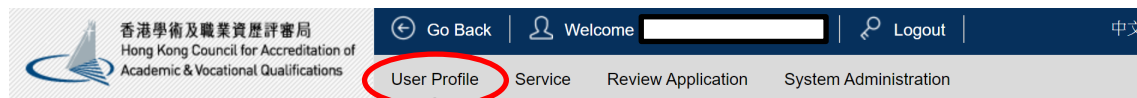
❖ *Please update the Contact Persons and List of Addresses in "User Profile" before starting the application.*
❖ *Only when updated in "User Profile" can contact persons and addresses be shown in the application.*

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

Delete | Add

Contact Persons

ⓘ **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	-

Delete | Add

2. Create New Application

Step 1: Click [Create New Application]

Step 2: Click the pull down button, select "Re-assessment of CPD Activity", then click [Next]

Step 3: After reading the guidelines, please click [Next]

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.hkcaavq.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. 072-861-502020073 (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
    Tel: 3658 0000
    Email: info@hkcaavq.edu.hk

By clicking Next, you agree to the above guideline.

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3. Fill in the CPD Re-assessment Online Application Form

> **Tips:**
> 1. You may click **Save as Draft** during the process. The application is temporarily saved and could be retrieved for later editing.

Step 1: Fill in the information

CPD Re-assessment Online Application Form

Click here to view the notes to activity organisers.

Type of Application:	Re-assessment of CPD Activity	Created:	24/05/2016 16:32:18
Status:	Draft	Last Updated:	24/05/2016 16:32:18
Application ID:	1600101	Submitted:	-

Name of Activity Organiser: [▼]

CPD Ref. No.: [   ]

Title of Activity: [   ] [   ]

        English   Chinese

Existing Approval Period: From: [   ] 🗓 To: [   ] 🗓

Approval Period Applied for: From: [   ] 🗓 To: [   ] 🗓

Number of CPD Hours Approved in the Existing Approval Period: [   ]   Assessment Fee: -

Target Participants:

☐ In-house (employees of CPD Provider)   ☐ General Public   ☐ Employees of Commissioning Body

☐ Others (Please specify): [   ]

Step 2: 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.*

Responsible Persons

Title	Surname	First Name	Organisation	Position	Contact Phone No.	Fax No.	Email	Contact Address	Type
					No records found.				

Delete Add

Select Contact Person ✕

ⓘ *Please update in User Profile if the Contact Person is not found or is outdated.*

ⓘ *Please specify Head of Organisation / Department, Person-in-charge and Authorized Contact Person.*

☐ Title	Surname	First Name	Position	Contact Phone No.	Fax No.	Email	Contact Address
☐ Dr	Lee	Kuen Wai	Director	24567896	-	uat_cpd2@hkcaavq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon
☐ Mr	Wong	Ka Lee	Vice President	24567896	-	uat_cpd2@hkcaavq.edu.hk	-
☐ Mr	Yip	Man Chuen	Manager	23456789	-	uat_cpd2@hkcaavq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon

Type: * [▼]

Cancel Save

Select Contact Person ✕

ⓘ *Please update in User Profile if the Contact Person is not found or is outdated.*

ⓘ *Please specify Head of Organisation / Department, Person-in-charge and Authorized Contact Person.*

☐ Title	Surname	First Name	Position	Contact Phone No.	Fax No.	Email	Contact Address
☑ Dr	Lee	Kuen Wai	Director	24567896	-	uat_cpd2@hkcaavq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon
☐ Mr	Wong	Ka Lee	Vice President	24567896	-	uat_cpd2@hkcaavq.edu.hk	-
☐ Mr	Yip	Man Chuen	Manager	23456789	-	uat_cpd2@hkcaavq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon

Type: * [▼]

Authorised Contact Person
Head of Organisation / Department
Person-in-charge

Cancel Save

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3.1 Structured Activity

Steps 1-3: Fill in the necessary information

Activity Statistics

During the approval period,

1. Number of times the CPD activity has been held:
2. Total Number of Attendees:
3. Total number of participants who have successfully completed the activity:

ⓘ The total number of attendees refers to the number of participants who have signed in to the CPD activity.

ⓘ If the CPD activity adopts a modular design, please provide an attachment of the breakdown of the above figures for each of the modules.

Step 4: Fill in the information if there is/are any change(s) since Last Approval . If yes, please go to step 4a-4c. Otherwise, please go to step 5 to continue.

❖ *If there are more the one changes since Last approval, please repeat the steps 4a to 4c.*

Step 4a: Click Add

Changes since Last Approval

Type	Category	Change from	Change to	Reason(s)
		No records found.		

Delete | Add

Add Change

Category: *

Please specify below for other category:

Change from: *

Change to: *

Reason(s): *

Cancel | Save

Step 4b: Click the pull down button and select the category

Category: *

Please specify below for other category:

Activity Title
Adoption of Virtual Classroom
Appointment Criteria
Change on Virtual Classroom Delivery Arrangement (after approval of adoption of virtual classroom)
Course Contents
CPD Hours
Head of organization / department
Instructor
Medium of Instruction
Modular design
Name of Activity organizer
No. of maximum / minimum participants
Person-in-Charge/ Instructor
Quality Assurance
Target Participants
Training Venue
Others

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Remarks:

ⓘ 1. If there are changes involving both in activity contents and CPD hours in one single application, only the highest amount will be charged.

ⓘ 2. No additional fee will be charged for "Changes to be approved in the Next Approval Period" <u>except</u> for change in CPD hours and activity contents for more than 20% in a re-assessment application.

ⓘ 3. For changes less than or equal to 20% in activity contents within the same module (if applicable) or the whole CPD activity (for non-modular design activities) without changing the total CPD hours, please select **"<u>Others</u>"** under the "Category" for reporting the change(s), and state that the change of course content is less than or equal to 20% with details of change.

ⓘ 4. For Changes of categories other than the above, please select "Others" and specify the details.

Step 4c: Fill in the necessary information

❖ *If you would like to report the change since last approval, for example, the number of instructors from 10 to 11, you may fill-in 10 instructors in "Change from" and 11 instructors in "Change to" as below, and provide the Reason(s). Then Click* Save

Step 5: Fill in the information if there is/are any change(s) or changes to be approved in the next approval period . If yes, please go to step 5a-5b. Otherwise, please go to step 6 to continue.

Changes to be approved in the Next Approval Period

| Category	Change from	Change to	Reason(s)	Fee
		No records found.		

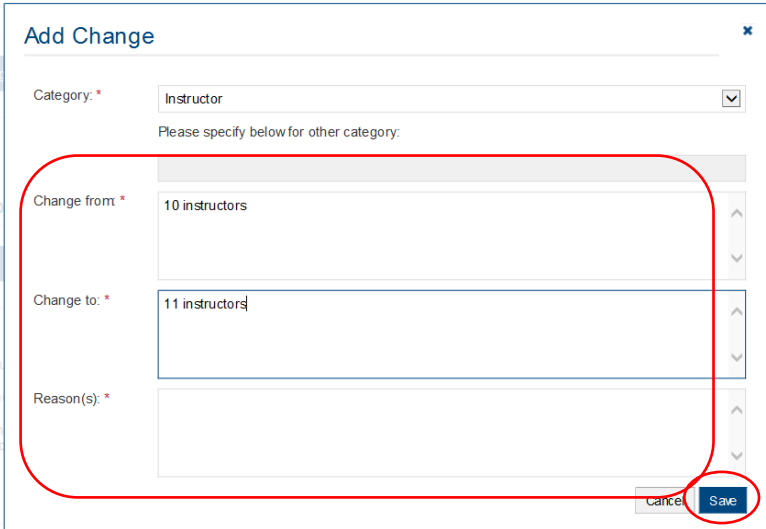Delete | Add

ⓘ 1. If there are changes involving both in activity contents and CPD hours in one single application, only the highest amount will be charged.

ⓘ 2. No additional fee will be charged for "Changes to be approved in the Next Approval Period" except for change in CPD hours and activity contents for more than 20% in a re-assessment application.

ⓘ 3. For changes less than or equal to 20% in activity contents within the same module (if applicable) or the whole CPD activity (for non-modular design activities) without changing the total CPD hours, please select **"Others"** under the "Category" for reporting the change(s), and state that the change of course content is less than or equal to 20% with details of change.

Step 5a: Click [Add]

Changes to be approved in the Next Approval Period

Category	Change from	Change to	Reason(s)	Fee
		No records found.		

Delete | Add

ⓘ 1. If there are changes involving both in activity contents and CPD hours in one single application, only the highest amount will be charged.

ⓘ 2. No additional fee will be charged for "Changes to be approved in the Next Approval Period" except for change in CPD hours and activity contents for more than 20% in a re-assessment application.

ⓘ 3. For changes less than or equal to 20% in activity contents within the same module (if applicable) or the whole CPD activity (for non-modular design activities) without changing the total CPD hours, please select **"Others"** under the "Category" for reporting the change(s), and state that the change of course content is less than or equal to 20% with details of change.

Add Change ✖

Category: *   [▼]
                     Please specify below for other category:
                     [   ]

Change from: *   [   ]

Change to: *   [   ]

Reason(s): *   [   ]

Cancel | Save

on taken in the last approval period (e.g. participant evaluation results, review meeting, class observation and follow-up actions taken

Step 5b: Click the pull down button and select the category

❖ *Example: If you would like to change the number of instructors from 10 to 11, you may fill-in 10 instructors in "Change from" and 11 instructors in "Change to" as below, and provide the Reason(s). Then Click* Save
❖ *You may also need to upload the relevant documents in support of your application.*

Step 6: Fill in the information in relation to Quality Assurance.

❖ *For Structured Activity, please provide the Report of quality assurance activities conducted during the reporting period such as date(s) of course evaluation meeting(s), class observation(s), and follow-up action(s) on identified issue(s) from the participant evaluation.*
❖ *For Structured Activity adopting virtual classroom, please also provide the report of quality assurance of virtual classroom, e.g. specific attendance monitoring system, policies / guideline / methods for maintaining integrity and security of participants' data*
❖ *For applying for the virtual classroom during the re-assessment, please 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.*

❖ *If the content exceeds the word limit, you may provide this information as attachment.*

Quality Assurance

Brief account of Quality Assurance activities conducted / follow-up action taken in the last approval period (e.g. participant evaluation results, review meeting, class observation and follow-up actions taken arising from participant's feedback):

Upload Supporting Document(s)

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 Re-assessment of Structured Type 1 Qualified CPD for Licensed Insuracne Intermediaries for preapering the documents.*
   ❖ *The duly completed checklist should be uploaded (as Attachment 12) together with the documents.*

Supporting Document(s)

Please upload supporting documents according to the checklist.

Document Type	File Name	Uploaded Date / Time
	No related documents uploaded.	

Delete Upload Documents

Application for
Re-assessment of Structured Type 1 Qualified CPD Activity
for Licensed Insurance Intermediaries

Supporting Document Checklist

Please prepare and upload the following documents to support your application. Failure to provide the following documents may delay the assessment process and affect the assessment outcome.

Please indicate the availability of the documents. The duly completed checklist should be uploaded (as Attachment 12) together with the documents.

Attachment No.	Documents Concerned	Availability
1.	Background information about the CPD activity organiser with organisational chart. (*If there are any updates)	❑ yes* ❑ not applicable
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. (*If there are any updates / applicable to first time application of virtual classroom)	❑ yes* ❑ not applicable
3.	Copy of Business Registration (BR) / Certificate of Incorporation (CI) (*If there are any updates including the expiry date showed in the BR or CI)	❑ yes* ❑ not applicable
4.	Updated 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.	❑ yes
5.	If there are any changes in the course contents, a full set of updated course materials, seminar handouts, and/or seminar papers is required. A comparison table should be submitted to report the change(s). CPD provider should also provide the rationale for the amendment(s).	❑ yes ❑ not applicable

6.	List of approved activity venue(s) for the next approval period with full address(es) and capacity(ies). For Structured Activity adopting virtual classroom only and without a designated teaching venue, please mark "virtual classroom" and maximum number of participants per activity in the list.	❑ yes
7.	For new venue(s) not previously approved, please upload floor plan(s) with capacity(ies), rental agreement(s) and insurance coverage for third party liability.	❑ yes ❑ not applicable
8.	Profiles of all instructors or presenters including their academic and professional qualifications, and training/industry experience.	❑ yes
9.	Summary of course evaluation results for the reporting period.	❑ yes
10.	Report of quality assurance activities conducted during the reporting period such as date(s) of course evaluation meeting(s), class observation(s), and follow-up action(s) on identified issue(s) from the participant evaluation. For Structured Activity adopting virtual classroom, please also provide the report of quality assurance of virtual classroom, e.g. specific attendance monitoring system, policies / guideline / methods for maintaining integrity and security of participants' data For applying for the virtual classroom during the re-assessment, please 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.	❑ yes ❑ already stated in the Online Application Form
11.	Sample attendance certificate issued to the CPD participants	❑ yes
12.	Passing rate(s) of examination and/or continuous assessment (*Where applicable)	❑ yes ❑ not applicable

-- END --

1   2

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 documents in one go.*

Supporting Document(s)

Please upload supporting documents according to the checklist.

Document Type	File Name	Uploaded Date / Time
	No related documents uploaded.	

`Delete` `Upload Documents`

Upload Documents   ✖

Document Type: *   Supporting Document   ▼

File Name: *   `Select Files`

                                                    `Cancel` `Upload`

Step 3: When the file(s) has been selected as below, click `Upload`

Upload Documents   ✖

Document Type: *   Supporting Document   ▼

File Name: *   `Select Files`

                      Lesson Plan.pdf (79KB)

                                                    `Cancel` `Upload`

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3.2 E-learning Activity

Steps 1-3: Fill in the necessary information

Step 4: Fill in the information if there is/are any change(s) since Last Approval . If yes, please go to step 4a-4c. Otherwise, please go to step 5 to continue.

> ❖ *If there are more the one changes since Last approval, please repeat the steps 4a to 4c.*

Step 4a: Click Add

Step 4b: Click the pull down button and select the category

Remarks:

ⓘ1. If there are changes involving both in activity contents and CPD hours in one single application, only the highest amount will be charged.

ⓘ 2. No additional fee will be charged for "Changes to be approved in the Next Approval Period" <u>except</u> for change in CPD hours and activity contents for more than 20% in a re-assessment application.

ⓘ 3. For changes less than or equal to 20% in activity contents within the same module (if applicable) or the whole CPD activity (for non-modular design activities) without changing the total CPD hours, please select **"<u>Others</u>"** under the "Category" for reporting the change(s), and state that the change of course content is less than or equal to 20% with details of change.

ⓘ 4. For Changes of categories other than the above, please select "Others" and specify the details.

Step 4c: Fill in the necessary information

❖ *If you would like to report the change since last approval, for example, the number of instructors from 10 to 11, you may fill-in 10 instructors in "Change from" and 11 instructors in "Change to" as below, and provide the Reason(s). Then Click* Save

Step 5: Fill in the information if there is/are any change(s) or changes to be approved in the next approval period . If yes, please go to step 5a-5b. Otherwise, please go to step 6 to continue.

Changes to be approved in the Next Approval Period

Category	Change from	Change to	Reason(s)	Fee
		No records found.		

Delete   Add

ⓘ 1. If there are changes involving both in activity contents and CPD hours in one single application, only the highest amount will be charged.

ⓘ 2. No additional fee will be charged for "Changes to be approved in the Next Approval Period" except for change in CPD hours and activity contents for more than 20% in a re-assessment application.

ⓘ 3. For changes less than or equal to 20% in activity contents within the same module (if applicable) or the whole CPD activity (for non-modular design activities) without changing the total CPD hours, please select "Others" under the "Category" for reporting the change(s), and state that the change of course content is less than or equal to 20% with details of change.

Step 5a: Click Add

Changes to be approved in the Next Approval Period

| Category	Change from	Change to	Reason(s)	Fee
		No records found.		

Delete   Add

ⓘ 1. If there are changes involving both in activity contents and CPD hours in one single application, only the highest amount will be charged.
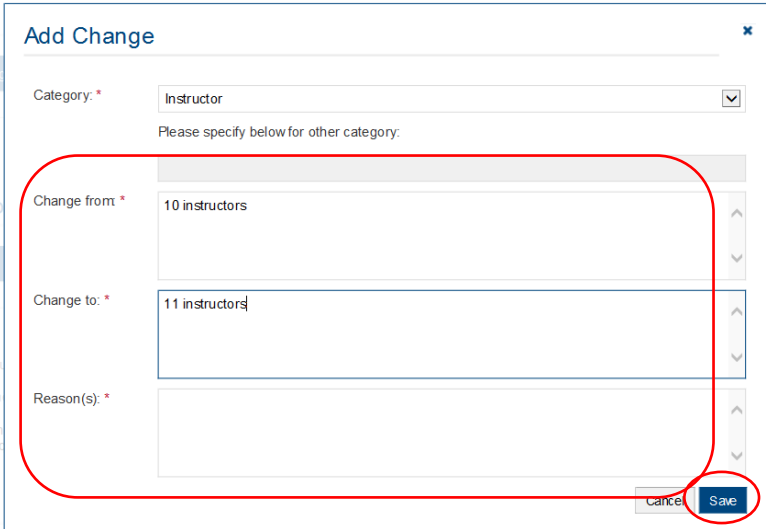
ⓘ 2. No additional fee will be charged for "Changes to be approved in the Next Approval Period" except for change in CPD hours and activity contents for more than 20% in a re-assessment application.

ⓘ 3. For changes less than or equal to 20% in activity contents within the same module (if applicable) or the whole CPD activity (for non-modular design activities) without changing the total CPD hours, please select "Others" under the "Category" for reporting the change(s), and state that the change of course content is less than or equal to 20% with details of change.

Add Change   ✖

Category: *   [▼]

Please specify below for other category:

[   ]

Change from: *   [   ]

Change to: *   [   ]

Reason(s): *   [   ]

                                          Cancel   Save

Step 5b: Click the pull down button and select the category

Category: *

Please specify below for other category:

Activity Title
Adoption of Virtual Classroom
Appointment Criteria
Change on Virtual Classroom Delivery Arrangement (after approval of adoption of virtual classroom)
Course Contents
CPD Hours
Head of organization / department
Instructor
Medium of Instruction
Modular design
Name of Activity organizer
No. of maximum / minimum participants
Person-in-Charge/ Instructor
Quality Assurance
Target Participants
Training Venue
Others

- ❖ *Example: If you would like to change the number of instructors from 10 to 11, you may fill-in 10 instructors in "Change from" and 11 instructors in "Change to" as below, and provide the Reason(s). Then Click* Save
- ❖ *You may also need to upload the relevant documents in support of your application.*

Add Change   ✕

Category: *   Instructor
                   Please specify below for other category:

Change from: *   10 instructors

Change to: *   11 instructors

Reason(s): *

                                                              Cancel   Save

Step 6: Fill in the information in relation to Quality Assurance.

- ❖ *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.*
- ❖ *If the content exceeds the word limit, you may provide this information as attachment.*

Quality Assurance

Brief account of Quality Assurance activities conducted / follow-up action taken in the last approval period (e.g. participant evaluation results, review meeting, class observation and follow-up actions taken arising from participant's feedback):

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Upload Supporting Document(s)

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 Re-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 16) together with the documents.*

Application for
Re-assessment of Type 1 Qualified E-learning Activity
for Licensed Insurance Intermediaries

Supporting Document Checklist

Please prepare and upload the following documents to support your application. Failure to provide the following documents may delay the assessment process and affect the assessment outcome.

Please indicate the availability of the documents. The duly completed checklist should be uploaded (as Attachment 16) together with the supporting documents.

No.	Documents to be uploaded	Availability
1.	Background information about the E-learning Activity Provider with organisational chart. (*If there are any updates)	☐ yes* ☐ not applicable
2.	Information of organising E-learning programmes / CPD activities. (*If there are any updates)	☐ yes* ☐ not applicable
3.	Copy of Business Registration (BR) / Certificate of Incorporation (CI) (*If there are any updates including the expiry date showed in the BR or CI)	☐ yes* ☐ not applicable
4.	Activity Plan with detailed breakdown; For E-Learning activity adopting modular design, an outline of all modules including module titles, CPD hours, contents and number of modules should be clearly specified.	☐ yes
5.	If there are any changes in instructional materials, e.g. lecture notes, PowerPoint slides and digital media, a full set of updated materials is required. A comparison table should be submitted to report the change(s). CPD provider should also provide the rationale for the amendment(s).	☐ yes ☐ not applicable
6.	List of approved activity venue(s) for the next approval period with full address(es) and capacity(ies). (*applicable to E-learning Activities with a designated assessment venue)	☐ yes* ☐ not applicable
7.	Floor plan, rental agreement, insurance coverage for third party liability and/or other possible evidence of activity venue. (*applicable to add a designated assessment venue to E-learning Activities)	☐ yes* ☐ not applicable
8.	Description of secured login and identity authentication system adopted	☐ yes
9.	Profiles of all E-learning administrators / instructors including their academic and professional qualifications, and training/industry experience.	☐ yes
10.	Sample End-of-Activity Participant Evaluation Form (*If there are any updates)	☐ yes* ☐ not applicable
11.	Summary of End-of-Activity participants' evaluation results for the last approval period	☐ yes
12.	Description of Technical Support Services including roles and responsibilities of respective technical personnel and a range of services provided by different technical personnel and the selection criteria for external service providers	☐ yes
13.	Sample attendance certificate issued to the CPD participants	☐ yes
14.	Report of Quality Assurance Mechanisms such as the procedures for the development, approval and review of E-learning Activities, measures to review activity content and monitor e-learning administrators/instructors' performance and review meeting(s) on monitoring the CPD activity and follow up users' feedback.	☐ yes ☐ already stated in the Online Application Form
15.	Question bank of EoA/EoM assessment(s) with assessment criteria / model answers	☐ yes
16.	Completed Document Checklist with the Availability indicated	☐ yes

– END –

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 documents in one go.*

Supporting Document(s)

Please upload supporting documents according to the checklist.

Document Type	File Name	Uploaded Date / Time
	No related documents uploaded.	

Delete   Upload Documents
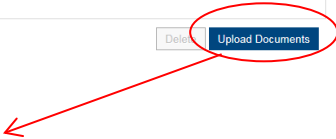
Upload Documents   ✖

Document Type: *   Supporting Document   ▼

File Name: *   Select Files

                                        Cancel   Upload

Step 3: When the file(s) has been selected as below, click Upload

Upload Documents   ✖

Document Type: *   Supporting Document   ▼

File Name: *   Select Files

                    Lesson Plan.pdf (79KB)

                                        Cancel   Upload

4. Payment

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

Payment

Assessment Fee:	$8,000.00	Payment Method:	Bank-Deposit ▾

If you select to settle the payment by bank deposit, please upload the proof of payment. If you wish to pay by cheque, please send the cheque with the printout available after p — Cheque / Tele-Transfer

Proof of Payment: -

Choose File to Upload: **Select File**

Upload Proof of Payment

- ❖ *If you wish to pay by cheque, please send the cheque with the printout available after pressing "Submit Application"*
- ❖ *If you select to settle the payment by bank deposit, please upload the proof of payment with the following Step 2-3*

Step 2: Select Bank-Deposit in Payment Method, then click **Select File**

Payment

Assessment Fee:	$8,000.00	Payment Method:	

If you select to settle the payment by bank deposit, please upload the proof of payment. If you wish to pay by cheque, please send the cheque with the printout available after p — Bank-Deposit / Cheque / Tele-Transfer

Proof of Payment: -

Choose File to Upload: **Select File**

Upload Proof of Payment

Step 3: Click **Upload Proof of Payment**

Payment

Assessment Fee:	$8,000.00	Payment Method:	▾

If you select to settle the payment by bank deposit, please upload the proof of payment. 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**

Proof of payment.docx (12KB)

Upload Proof of Payment

Payment

Assessment Fee:	$8,000.00	Payment Method:	Bank-Deposit ▾

If you select to settle the payment by bank deposit, please upload the proof of payment. If you wish to pay by cheque, please send the cheque with the printout available after pressing 'Submit Application' to HKCAAVQ.

Proof of Payment: Proof of payment.docx ⊙

Choose File to Upload: **Select File**

Upload Proof of Payment

Step 4: If you would like to apply for an Express Service, please click "Apply for an Expree Service", then click [OK] .

❖ *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 Service

If you select to settle the payment by bank deposit, please upload the proof of payment. 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 [X]

⚠ Additional fee should be paid on top of the original assessment fee at the time when the express service application is accepted by HKCAAVQ.

[OK]

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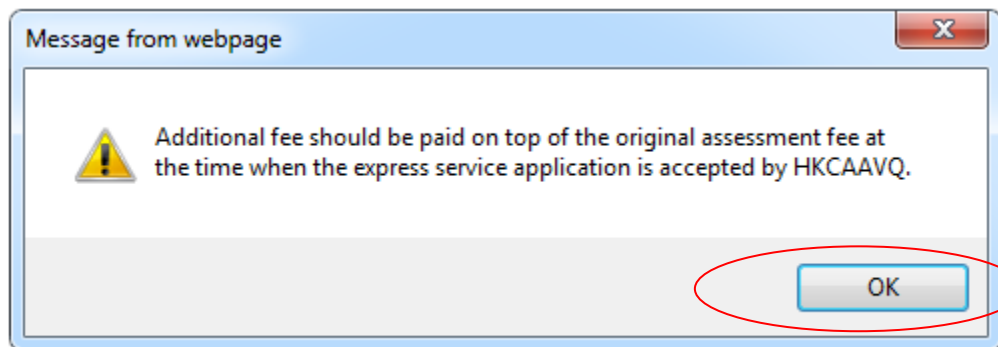
Step 1: Click [Download Application Form] , select your preferred Language and click [Download] . The form will be shown for your own record.

Declaration

I will abide by HKCAAVQ Assessment Criteria, and declare that all the information provided in the application form is accurate to the best of my knowledge. I understand and accept that HKCAAVQ may approach us direct for further information regarding the application. I also understand and accept that a non-refundable assessment fee is charged for the assessment work irrespective of the assessment outcome, and the fees should be made payable in advance to the 'Hong Kong Council for Accreditation of Academic and Vocational Qualifications'.

A person who, either orally or in writing, makes any statement or representation or furnishes any information to HKCAAVQ in connection with the performance of its functions under HKCAAVQ Ordinance (Chapter 1150) which the person knows or reasonably ought to know is misleading or false in a material respect commits an offence and is liable on conviction to a fine at level 5.

☐ I agree with the above declaration

[Submit Application]

[Download Application Form]

[Back] [Save as Draft]

Select Language   ✕

Please select your preferred Language: *   ○ Chinese   ● English

[Cancel] [Download]

Step 2: After reading the declaration, check the box next to "I agree with the above declaration", and press Submit Application

Declaration

I will abide by HKCAAVQ Assessment Criteria, and declare that all the information provided in the application form is accurate to the best of my knowledge. I understand and accept that HKCAAVQ may approach us direct for further information regarding the application. I also understand and accept that a non-refundable assessment fee is charged for the assessment work irrespective of the assessment outcome, and the fees should be made payable in advance to the 'Hong Kong Council for Accreditation of Academic and Vocational Qualifications'.

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☑ I agree with the above declaration

Submit Application

Download Application Form

Back   Save as Draft

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

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.

OK   Cancel

Step 4: The application has been submitted successfully. If you wish to pay by cheque, please print this page together with the cheque send to HKCAAVQ. Otherwise, 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	Type	Scope / Course Title / Reference	Status	Last Update On ˅	Document Uploaded
☐ 1600100	CPD	Assessment	aaa	For Review by HKCAAVQ	24/05/2016	⬇

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6. Special Function

The following functions are under the page of "My Application".
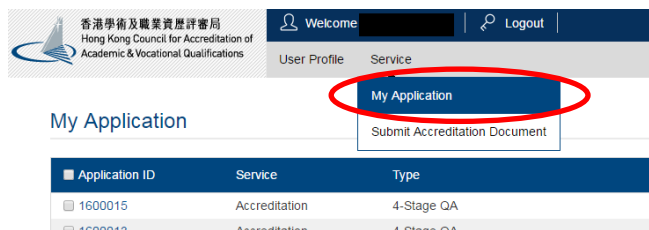
6.1 View Closed Applications

Step 1: Click View Closed Applications , you may review the completed application(s)

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

6.3 Copy as New Application

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

My Application

Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Updated	Document Uploaded
☑ 1600002	CPD	Change of Activity Information	-	Draft	26/05/2016	-

[View Closed Applications] [Delete Selected Applications] [Copy as New Application] [Create New Application]

My Application

Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Updated ⌄	Document Uploaded
☐ 1600003	CPD	Change of Activity Information	a	Draft	26/05/2016	-
☐ 1600002	CPD	Change of Activity Information	a	For Review by HKCAAVQ	26/05/2016	-

[View Closed Applications] [Delete Selected Applications] [Copy as New Application] [Create New Application]

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

My Application

Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Updated ⌄	Document Uploaded
☐ 1600003	CPD	Change of Activity Information	a	Draft	26/05/2016	-
☐ 1600002	CPD	Change of Activity Information	a	For Review by HKCAAVQ	26/05/2016	-

[View Closed Applications] [Delete Selected Applications] [Copy as New Application] [Create New Application]

CPD Assessment Online Change Application Form

Click here to view the notes to activity organizers.

Type of Application:	Change of CPD Activity	Created:	26/05/2016 14:44:48
Status:	Draft	Last Updated:	26/05/2016 14:44:48
Application ID:	1600003	Submitted:	-

Name of Activity Organiser: Institute of Financial Planners of Hong Kong

CPD Ref. No.: 80/92/02

Title of Activity: a

English   Chinese

Details of Proposed Changes

☐ Category	Change from	Change to	Effective Date	Reason(s)
☐ CPD Hours	1	2	02/05/2016	more ppl

[Delete] [Add]

Responsible Persons

☐ Title	Surname	First Name	Organisation	Position	Contact Phone No.	Fax No.	Email	Contact Address	Type
☐ Mr	a	a	-	-	-	-	-	-	Head of Organisation / Department
☐ Ir	b	b	-	-	-	-	-	-	Person-in-charge
☐ Ir	b	b	-	-	-	-	-	-	Authorised Contact Person

[Delete] [Add]

Supporting Document(s)

Please upload supporting documents according to the checklist.

Document Type	File Name	Uploaded Date / Time
	No related documents uploaded.	

[Delete] [Upload Documents]

Declaration

I will abide by HKCAAVQ Assessment Criteria, and declare that all the information provided in the application form is accurate to the best of my knowledge. I understand and accept that HKCAAVQ may approach us direct for further information regarding the application. I also understand and accept that a non-refundable assessment fee is charged for the assessment work irrespective of the assessment outcome, and the fees should be made payable in advance to the 'Hong Kong Council for Accreditation of Academic and Vocational Qualifications'.

A person who, either orally or in writing, makes any statement or representation or furnishes any information to HKCAAVQ in connection with the performance of its functions under HKCAAVQ Ordinance (Chapter 1150) which the person knows or reasonably ought to know is misleading or false in a material respect commits an offence and is liable on conviction to a fine at level 5.

☐ I agree with the above declaration

[Submit Application]

[Download Completed Application Form for Your Own Record]

[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/assessment/CPD_IA_prog/.

- For enquiries, please contact:

  Assessment and Vetting of CPD Activities for Licensed Insurance Intermediaries
  Contact person: Ms Ann LAM
  Telephone: 3658 0137
  Email: cpd_ia@hkcaavq.edu.hk