

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 [LOGIN FOR EXISTING ACCOUNTS](#)

香港學術及職業資歷評審局
Hong Kong Council for Accreditation of
Academic & Vocational Qualifications

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HOME SYSTEM REQUIREMENTS USEFUL LINKS HELP

Welcome to the e-Portal

Welcome to our e-Portal for accreditation and assessment services!

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 and review the status of their applications and submissions.

The e-Portal provides for the following services:

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

2016.05.16
e-Portal service will be launched soon.

NEW USERS LOGIN FOR EXISTING ACCOUNTS

Disclaimer | Privacy Policy

I Agree

Step 2: After reading the Disclaimer, click

Disclaimer

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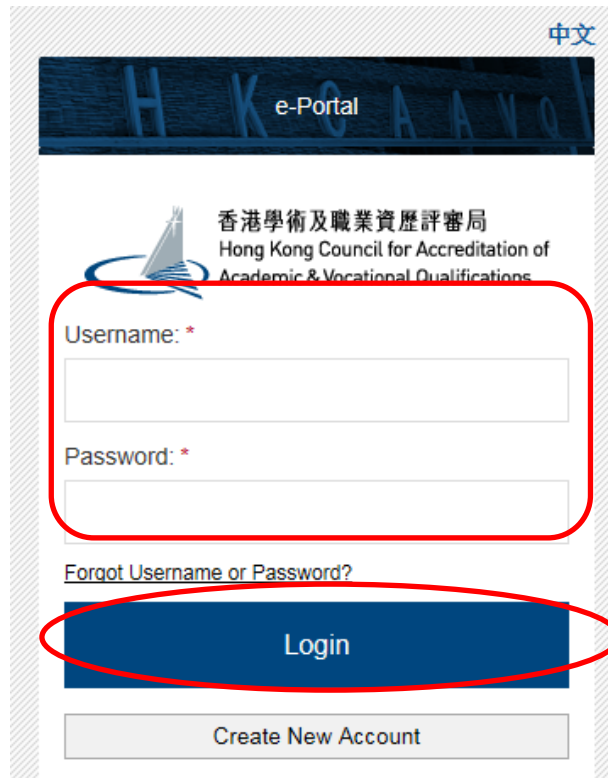
HKCAAVQ shall not in any circumstances or in any way be liable to any person (including any body of persons, corporate or unincorporated) for any loss or damage (including but not limited to consequential, indirect, incidental and special loss/damage) arising out of or in connection with this website or the websites which are linked to this website, the information on this website or on the websites which are linked to this website, the use of or the inability to use any of such information.

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Step 3: Enter the Username and Password, click

Login



中文

HK 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: *

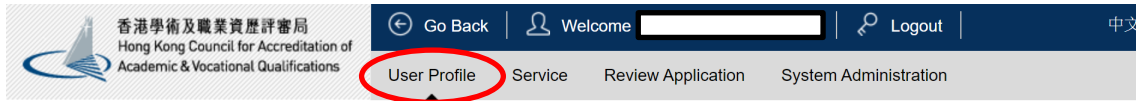
[Forgot Username or Password?](#)

Login

Create New Account

1.1 Update “User Profile”

Step 1: Click User Profile



User Profile

Username: Change Password

Name: *
Title: Surname: First Name:

- ❖ 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)
<input type="checkbox"/> 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)
<input type="checkbox"/> Dr	CHAN	Alan	Principal	12345678	-	info@abc.com.hk	abc	-
<input type="checkbox"/> Dr	CHAN	Cindy	Vice Principal	12345678	-	info@abc.com.hk	dfd	-
<input type="checkbox"/> Dr	CHAN	david	Manager	12345678	-	info@abc.com.hk	dfd	-

Delete Add

2. Create New Application

Step 1: Click [Create New Application](#)

The screenshot shows the top navigation bar with the logo of the Hong Kong Council for Accreditation of Academic & Vocational Qualifications (HKCAAVQ) and the user profile 'Welcome CPDPUSER4'. Below the navigation bar is the 'My Application' section, which contains a table of applications. The table has columns for Application ID, Service, Type, Scope / Course Title / Reference, Status, Last Update On, and Document Uploaded. The 'Create New Application' button is circled in red.

Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Update On	Document Uploaded
<input type="checkbox"/> 1600085	CPD	Re-assessment	-	Draft	19/05/2016	-
<input type="checkbox"/> 1600078	CPD	Change of Activity Information	-	Draft	17/05/2016	-
<input type="checkbox"/> 1600077	CPD	Change of Activity Information	-	Draft	16/05/2016	-
<input type="checkbox"/> 1600060	CPD	Change of Activity Information	-	Draft	11/05/2016	-
<input type="checkbox"/> 1600032	CPD	Change of Activity Information	-	Draft	10/05/2016	-
<input type="checkbox"/> 1600031	CPD	Change of Activity Information	-	Draft	10/05/2016	-
<input type="checkbox"/> 1600020	CPD	Re-assessment	-	Draft	06/05/2016	-
<input type="checkbox"/> 1600017	CPD	Assessment	-	Draft	06/05/2016	-

Buttons: [View Closed Applications](#) [Delete Selected Applications](#) [Copy as New Application](#) [Create New Application](#)

Step 2: Click the pull-down button, select “Assessment of CPD Activity”, then click [Next](#)

The screenshot shows the 'Please Select Service and Type of Application' form. The 'Service' dropdown is set to 'The Continuing Professional Development Programme for Insurance Intermediaries (CPD)'. The 'Type of Application' dropdown is open, and 'Assessment of CPD Activity' is selected. The 'Next' button is circled in red.

Service: * The Continuing Professional Development Programme for Insurance Intermediaries (CPD)

Type of Application: *
Change of CPD Activity
Change of QF Accredited Learning Programme as CPD activity
Assessment of CPD Activity
Vetting of QF Accredited Learning Programme as CPD activity
Re-assessment of CPD Activity
Renewal of QF Accredited Learning Programme as CPD activity

[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.

[Next](#)

3. Fill in the CPD 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 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*

CPD Assessment Online Application 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:	<input type="text"/>	<input type="text"/>
<input type="button" value="Title of Activity"/>	English	Chinese

Information about Activity Organiser

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.

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.

<input type="checkbox"/>	Title	Surname	First Name	Position	Contact Phone No.	Fax No.	Email	Contact Address
<input type="checkbox"/>	Dr	Lee	Kuen Wai	Director	24567896	-	uat_cpd2@hkcaa.vq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon
<input type="checkbox"/>	Mr	Wong	Ka Lee	Vice President	24567896	-	uat_cpd2@hkcaa.vq.edu.hk	-
<input type="checkbox"/>	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: *

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.

<input type="checkbox"/>	Title	Surname	First Name	Position	Contact Phone No.	Fax No.	Email	Contact Address
<input checked="" type="checkbox"/>	Dr	Lee	Kuen Wai	Director	24567896	-	uat_cpd2@hkcaa.vq.edu.hk	Room 2000, Tai Koo Building, 256 Prince Edward Road, Mong Kok, Kowloon
<input type="checkbox"/>	Mr	Wong	Ka Lee	Vice President	24567896	-	uat_cpd2@hkcaa.vq.edu.hk	-
<input type="checkbox"/>	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: *

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

Cancel **Save**

3.1 Structured Activity

Steps 1-3: Information about the Activity

Information about the Activity

1 Proposed Starting Date:

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 Adoption 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 approved in other activity(ies)?

Yes, please provide the CPD Reference No. of the latest approved activity: No

(c) Ratio of administrators to participants:

(d) Virtual Classroom delivery arrangement is not applicable to the module(s):

Assessment 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.	

Add Module

Module Title: *

Number of Hours: *

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

- ❖ *Please refer to Guidance Notes for definition of Course, Seminars or Workshop.*

8 Type of the Activity:


 If the CPD activity is "E-learning", please click "Other (Please specify)" and input "E-learning".

Course 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”.*


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 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 (or related) legislation Regulatory aspects of insurance practice in Hong Kong (but the activity is NOT under the category of "Ethics or Regulations")

Insurance Actuarial science Risk management Financial planning

 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):



- ❖ 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 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 (or related) Regulatory aspects of insurance practice in Hong Kong (but the activity is NOT under the category of legislation)

Insurance Actuarial science Risk management Financial planning

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):

e.g. Financial 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 **ONLY**, please input the maximum number of participants per activity for virtual classroom. .

10 Number of Participants 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.

11 Addresses of Teaching Venues:

For new venue(s) not previously approved by HKCAAVQ, please upload supporting documents such as floor plan(s), rental agreement(s) and insurance coverage for third party liability.

Venue Address	Venue Capacity
No records found.	
Delete Add	

Add Address ✕

If you cannot find your address(es) of teaching venue here, please add them in your user profile.

<input checked="" type="checkbox"/> Address	Capacity (for CPD only)
<input checked="" type="checkbox"/> abc	100

Cancel **Add**

Steps 12-15: Others Details of Activity

12 Spoken Language of Delivery:

English Cantonese Putonghua

13 Language of Printed Materials:

English Chinese

14 Frequency of the Activity per Year:

15 Are the participants of CPD activity required to complete any examination and/or continuous assessment?

Yes (please complete the following) The passing 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 describe 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.

Fees and Refund

1 Free of charge Fee paid by organisation Fee paid by participants \$

2 Any other miscellaneous fees?

Yes No

If yes, please provide the details below.

Item	Amount
No records found.	

Del Add

Add Miscellaneous Fee

Item: *

Amount: *

Cancel Save

Upload Supporting Documents

Step 1: Please download 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 Insurance Intermediaries for preparing the documents.
- ❖ The duly completed checklist should be uploaded (as Attachment 13) together with the documents.

Supporting Document(s)

Please upload supporting documents according to the [checklist](#). The template of instructor list is available here

Document Type	File Name	Uploaded Date / Time
No related documents uploaded.		
		<input type="button" value="Delete"/> <input type="button" value="Upload Documents"/>

Application for 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 13) together with the documents.

Attachment No.	Documents to be uploaded	Availability
1.	Background information about the CPD Activity Provider with <u>organisational</u> chart. <i>(* applicable to first time application/ if there are any updates)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> 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. <i>(* applicable to first time application/ if there are any updates)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
3.	Copy of Business Registration (BR) / Certificate of Incorporation (CI) <i>(* applicable to first time application/ if there are any updates including the expiry date showed in the BR or CI)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> 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.	<input type="checkbox"/> yes
5.	A full set of course materials, seminar handouts, or seminar papers.	<input type="checkbox"/> 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 only and without a designated teaching	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable

	venue, please check the box "not applicable". <i>(* applicable to new venue(s) not previously approved by HKCAAVQ).</i>	
7.	Profiles of all instructors or presenters including their academic and professional qualifications, and training/industry experience.	<input type="checkbox"/> yes
8.	Sample End-of-Activity Participant Evaluation Form.	<input type="checkbox"/> yes
9.	Sample attendance certificate issued to the CPD participants	<input type="checkbox"/> yes
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. 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	<input type="checkbox"/> yes <input type="checkbox"/> already stated in the Online Application Form
11.	Description of Technical Support Services <i>(* applicable to Structured Activity adopting virtual classroom)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
12.	Sample of assessment paper (Exam or Test) with assessment criteria. <i>(* Where applicable)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
13.	Completed Document Checklist	<input type="checkbox"/> yes

■ 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 document in one go.

Supporting Document(s)

Please upload supporting documents according to the checklist. The template of instructor list is available here

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

Del... **Upload Documents**

Upload Documents

Document Type: * Supporting Document

File Name: * **Select Files**

Cancel **Upload**

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

Upload Documents

Document Type: * Supporting Document

File Name: * **Select Files**

Lesson Plan.pdf (79KB)

Cancel **Upload**

3.2 E-learning Activity

Steps 1-3: Information about the Activity

Information about the Activity

1 Proposed Starting Date:

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 Adoption 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 approved in other activity(ies)?

Yes, please provide the CPD Reference No. of the latest approved activity: No

(c) Ratio of administrators to participants:

(d) Virtual Classroom delivery arrangement is not applicable to the module(s):

Assessment 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.	

Add Module

Module Title: *

Number of Hours: *

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 “E-learning”.*

8 Type of the Activity:


 If the CPD activity is "E-learning", please click "Other (Please specify)" and input "E-learning".

Course 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”.*

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 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 (or related) legislation


Regulatory aspects of insurance practice in Hong Kong (but the activity is NOT under the category of "Ethics or Regulations")


Insurance

Actuarial science

Risk management

Financial planning

 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):



❖ *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 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 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 (or related) Regulatory aspects of insurance practice in Hong Kong (but the activity is NOT under the category of "Ethics or Regulations")

Insurance Actuarial science Risk management Financial planning

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):

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 Participants 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-of-activity 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 unload supporting documents such as floor plan(s), rental agreement(s) and insurance coverage for third party liability.

Venue Address	Venue Capacity
No records found.	

Add Address 

If you cannot find your address(es) of teaching venue here, please add them in your user profile.

<input checked="" type="checkbox"/> Address	Capacity (for CPD only)
<input checked="" type="checkbox"/> abc	100

Steps 12-15: Others Details of Activity

- 12 Spoken Language of Delivery:
- English Cantonese Putonghua
- 13 Language of Printed Materials:
- English Chinese
- 14 Frequency of the Activity per Year:
- 15 Are the participants of CPD activity required to complete any examination and/or continuous assessment?
- Yes (please complete the following) The passing mark: No

Instructor Profile

- ❖ *For E-learning Activity, please state the Minimum Appointment Criteria of E-learning 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

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.

Fees and Refund

1 Free of charge Fee paid by organisation Fee paid by participants \$

2 Any other miscellaneous fees?

Yes No

If yes, please provide the details below.

Item	Amount
No records found.	

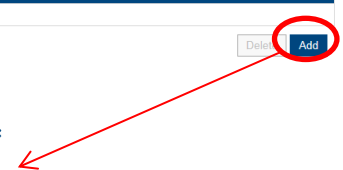
Del Add

Add Miscellaneous Fee *

Item: *

Amount: *

Cancel Save



Upload Supporting Documents

Step 1: Please download 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 Insurance Intermediaries for preparing the documents.
- ❖ The duly completed checklist should be uploaded (as Attachment 14) together with the documents.

Supporting Document(s)

Please upload supporting documents according to the [checklist](#). The template of instructor list is available here

Document Type	File Name	Uploaded Date / Time
No related documents uploaded.		
		<input type="button" value="Delete"/> <input type="button" value="Upload Documents"/>

Assessment for Application for 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 14) together with the supporting documents.

No.	Documents to be uploaded	Availability	Supplementary information for E-learning Activity Providers
1.	Background information about the E-learning Activity Provider with organisational chart. *Applicable to the time application of E-learning Activity / If there are any updates, information regarding E-learning programmes / CPO activities.	<input type="checkbox"/> yes <input type="checkbox"/> not applicable	N/A
2.	*Applicable to the time application of E-learning Activity / If there are any updates.	<input type="checkbox"/> yes <input type="checkbox"/> not applicable	E-learning Activity Providers are to demonstrate their capabilities and capacities for conducting E-learning Activities through track records of conducting similar activities, e.g. experiences in designing / delivering / administering e-learning activities.
3.	Copy of Business Registration (BR) / Certificate of Incorporation (CI) *Applicable to the time application of E-learning Activity / If there are any updates including the rights date.	<input type="checkbox"/> yes <input type="checkbox"/> not applicable	N/A
4.	Activity Plan also details activity delivery module design, an outline of all modules including module title, CPO hours, contents and number of modules should be clearly specified.	<input type="checkbox"/> yes	An Activity Plan for E-learning Activities should include, but not limited to the following: - Learning objectives / list of topics / contents through which participants should be able to attain the stated objective of the E-learning Activities; - Mapping of instructors

5.	A full set of instructional materials, e.g. lecture notes, PowerPoint slides, transcription of videos/ files (if applicable) and digital media.	<input type="checkbox"/> yes	Materials (e.g. text / narration / multi-media) against the related topics / contents. For example, 100% "pull-in" files embedded in session if applicable to the design and implementation about activities / not general questions (or any other forms of components) adopted as learning reinforcement tool (e.g. E-learning assessment) at the end of each topic, if any; "check points" where participants could resume their learning after logout. For E-learning Activities adopting module design, the activity plan should further include the images and sequences / pre-arrange between modules, where appropriate.
6.	Floor plan, rental agreement, insurance coverage for third party liability and/or other possible evidence of activity venue. *Applicable to E-learning Activities with a designated assessment venue.	<input type="checkbox"/> yes <input type="checkbox"/> not applicable	E-learning Activity Providers should trace the instructional materials submission with an easy-to-read and consistent system and clearly indicate their sequence / mapping with the corresponding topics / contents in the Activity Plan. The instructional materials submitted for assessment should be in the format that allow the Assessment Authority to review any content in the process. However, when the E-learning Activities are actually delivered, participants should be prevented from copying or downloading through any

7.	Description of secured login and identity authentication system adopted.	<input type="checkbox"/> yes <input type="checkbox"/> already approved previously <input type="checkbox"/> E-learning	parts of the instructional materials. E-learning Activity Providers should provide related information, such as the system design / built-in functions for the above purpose for assessment. When applying for assessment of E-learning Activities for the first time, E-learning Activity Providers should provide the Assessment Authority with access right to the e-learning platform / learning management system through which the E-learning Activities are delivered, with the access right granted, the Assessment Authority should have the liberty to review any parts of the instructional materials. E-learning Activity Providers who do not provide a two-factor authentication should undertake the end-of-module (EOM) pre-activity (ESA) assessment of the entire E-learning Activity in person at a designated venue as provided for E-learning Activities. The venue setting should be suitable and in accordance with the design of the EOM / ESA assessment of the E-learning Activities as appropriate. For E-learning Activities conducted in an unaccredited environment, E-learning Activity Providers should provide detailed description with screen-shots about the
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8.	Profiles of all E-learning administrators / instructors including their academic and professional qualifications, and training/industry experience.	<input type="checkbox"/> yes	through which the E-learning Activities are delivered, with the access right granted, the Assessment Authority should be able to test the secured login and identity authentication system. If the secured login and identity authentication system adopted for the E-learning Activities applying is the same as that has already been approved in other E-learning Activities, the E-learning Activity Providers should tick the box "already approved in previous E-learning Activity application" and is not required to submit the information again.
9.	Sample End-of-Activity Participant Evaluation Form	<input type="checkbox"/> yes	The evaluation form can be in electronic or hard copy format.
10.	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	<input type="checkbox"/> already approved in previous E-learning Activity application	E-learning Activity Providers can appoint in-house technical personnel or external service providers for the technical support services. There should include, but not limited to the following: - Technical support services available to participants, such as troubleshooting, online

11.	Sample attendance certificate issued to the CPO participants	<input type="checkbox"/> yes	entity, etc. - Availability of the services (e.g. office hours or 24 hours per day / 7 days a week, etc.) and the service lead time in normal circumstances. Nevertheless, the online lesson services should be provided as soon as practicable or until the next working day, at the latest. - Roles and responsibilities of respective technical personnel. - Selection criteria for the selection of external service providers, as appropriate. If the technical support services information for the E-learning Activities applying is the same as that has already been approved in other E-learning Activities, the E-learning Activity Providers should tick the box "already approved in previous E-learning Activity application" and is not required to submit the information again.
12.	Description of Quality Assurance Mechanisms such as the procedures for the monitoring, approval and review of E-learning Activities, measures to review activity content and monitor learning administrators/instructors' performance and review/feedback on monitoring the CPO activity and follow up users' feedback.	<input type="checkbox"/> yes <input type="checkbox"/> already approved in the Online Application Form	Where revision / update of the E-learning Activities involve an external party, such as an external platform service provider, the E-learning Activity Providers should also consider communication channels and approval processes for both the internal and external parties. Completion rate in E-learning Activities refers to the percentage of enrolled

13.	Activity application		login procedures / sites, including, but not limited to - - Identity authentication methods / technologies adopted for the secured login system - Initiator / prompts to prevent impostors, if applicable - Continuous authentication measures during the E-learning Activities and before EOM / ESA assessment to prevent impostors. For every 30-minute, the participants should be required to authenticate themselves at least once. They should also be required to do so before taking the assessment. - Decision by the participants to the effect that they are warned and given to understand the consequences of impersonation or any incidents of allowing impostors to take the E-learning Activities. If a two-factor authentication is adopted, the two authentication methods adopted should be different. If One-Time-Password (OTP) is adopted as an authentication method, using an email to receive the OTP is currently accepted.
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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.

Supporting Document(s)

Please upload supporting documents according to the checklist. The template of instructor list is available here

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

Del **Upload Documents**

Upload Documents

Document Type: * Supporting Document

File Name: * **Select Files**

Cancel Upload

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

Upload Documents

Document Type: * Supporting Document

File Name: * **Select Files**

Lesson Plan.pdf (79KB)


Cancel **Upload**

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

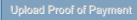
Payment

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: 




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

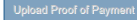
Payment

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: 




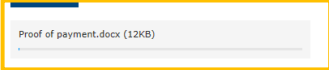
Step 3: Click 

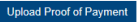
Payment

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: -

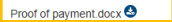
Choose File to Upload: 





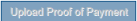
Payment

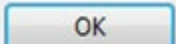
Assessment Fee: \$8,000.00 Payment Method: 

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: 



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

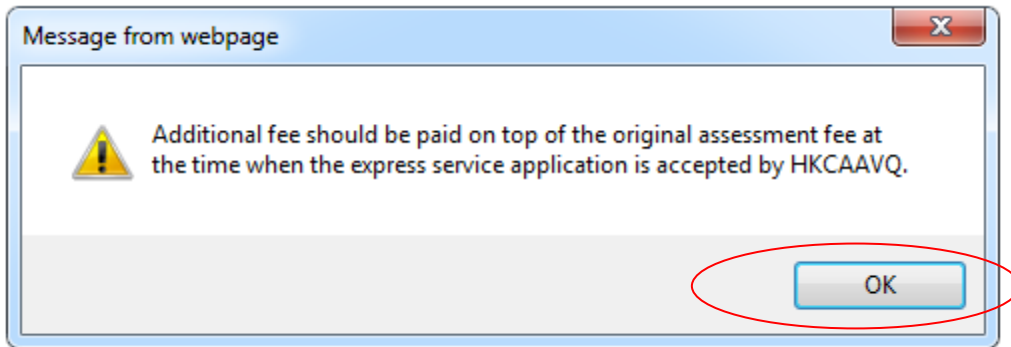
Assessment Fee: \$8,000.00 Payment Method:

Apply for an Express 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:



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

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](#)

Select Language

Please select your preferred Language: * Chinese English

[Cancel](#) [Download](#)

The screenshot displays the 'Assessment Application Form' with several sections visible:

- SECTION A: Activity Details**: Includes a table for 'Responsible Person' with columns for Name, Position, and Organisation. It also has fields for Address, Phone, and Email.
- SECTION B: Information about the Activity**: Contains multiple-choice questions about the activity type, content, and frequency.
- SECTION C: Quality Assurance**: Includes a declaration section where the applicant agrees to the assessment criteria and provides details about the activity.

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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agree with the above declaration

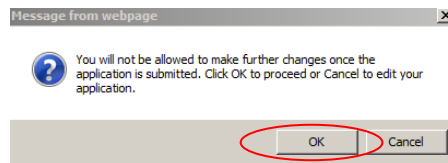
Submit Application

Download Application Form

Back Save as Draft

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

OK



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

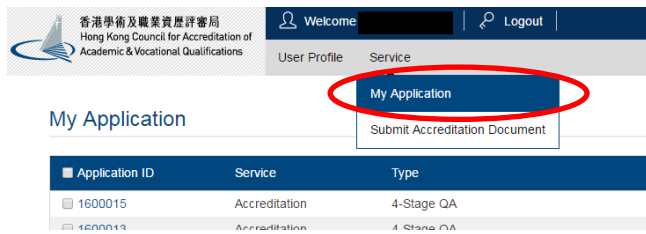
Step 5: The application you submitted to HKCAAVQ will be shown under “My Application”. The status of the application will be changed to “For Review by HKCAAVQ”.

My Application

Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Update On	Document Uploaded
<input type="checkbox"/> 1600100	CPD	Assessment	aaa	For Review by HKCAAVQ	24/05/2016	

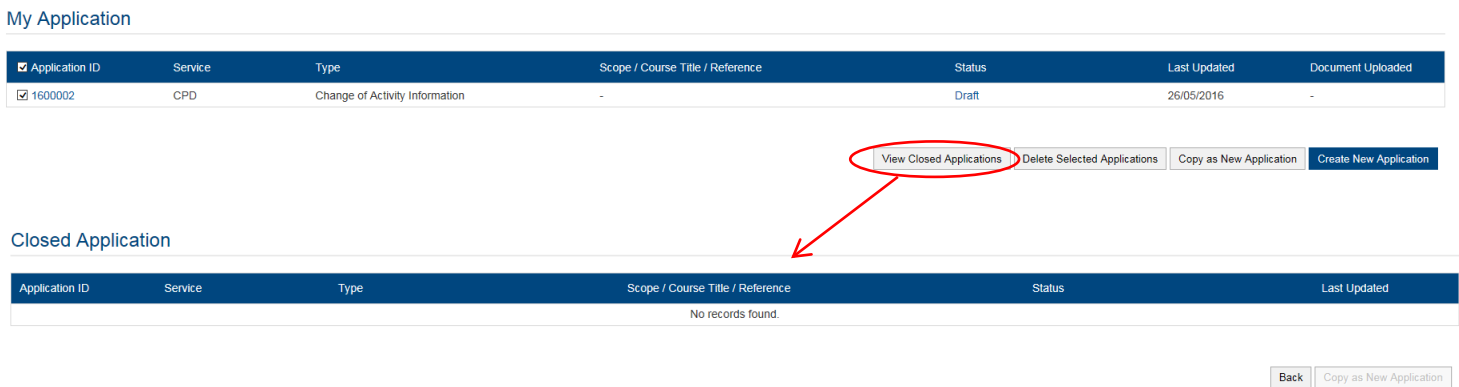
6. Special Function

The following functions are under the page of “My Application”.



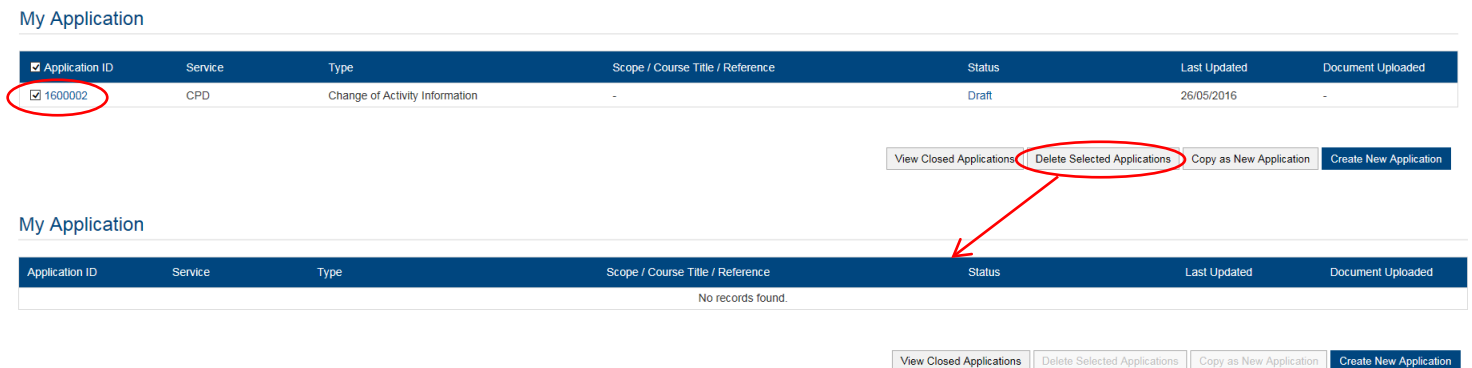
6.1 View Closed Applications

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**, the information of the selected application(s) will be copied with different Application ID.

My Application

<input checked="" type="checkbox"/> Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Updated	Document Uploaded
<input checked="" type="checkbox"/> 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

<input type="checkbox"/> Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Updated	Document Uploaded
<input type="checkbox"/> 1600003	CPD	Change of Activity Information	a	Draft	26/05/2016	-
<input type="checkbox"/> 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

<input type="checkbox"/> Application ID	Service	Type	Scope / Course Title / Reference	Status	Last Updated	Document Uploaded
<input type="checkbox"/> 1600003	CPD	Change of Activity Information	a	Draft	26/05/2016	-
<input type="checkbox"/> 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 organisers

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 Organisation: 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)
<input type="checkbox"/> CPD Hours	1	2	02/05/2016	more ppt

[Delete](#) [Add](#)

Responsible Persons

Title	Surname	First Name	Organisation	Position	Contact Phone No.	Fax No.	Email	Contact Address	Type
<input type="checkbox"/> Mr	a	a	-	-	-	-	-	-	Head of Organisation / Department
<input type="checkbox"/> Mr	b	b	-	-	-	-	-	-	Person-in-charge
<input type="checkbox"/> Mr	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

Telephone: 3658 0234

Email: cpd_ia@hkcaavq.edu.hk