

# 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](#)

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**

2016.05.16  
e-Portal service will be launched soon.

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

NEW USERS **LOGIN FOR EXISTING ACCOUNTS**

Disclaimer | Privacy Policy

## Step 2: After reading the Disclaimer, click

I Agree

### Disclaimer

Whilst the Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAAVQ) endeavours to ensure the accuracy of the information on this website, the information is for reference only and is subject to change by HKCAAVQ at any time without prior notice. HKCAAVQ makes no warranties, representations and statements (whether express or implied) of any kind in relation to the information, including any warranties, representations and statements in respect of the accuracy, completeness, timeliness and fitness 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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Users are responsible for making their own assessment of the information available on or through this website. Users are advised to verify the information available on or through this website (i.e. by making reference to original publications, legislations, etc.) and obtain independent professional advice (including professional legal advice) before relying or acting on any of the information.

I Agree

## Step 3: Enter the Username and Password, click

Login

中文

H K e-Portal A A V Q

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

Username: \*

Password: \*

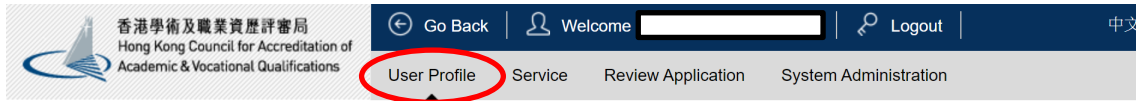
[Forgot Username or Password?](#)

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 user interface of the HKCAAVQ system. At the top, there is a navigation bar with the HKCAAVQ logo, the text 'Welcome CPDPUSER4', and a 'Logout' link. Below this is a 'My Application' section containing 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 “Re-assessment of CPD Activity”, then click **Next**

Please Select Service and Type of Application

The screenshot shows the 'Type of Application' dropdown menu. The menu is open, showing several options. The option 'Re-assessment of CPD Activity' is highlighted with a red arrow. 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

Buttons: **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](http://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](mailto:info@hkcaavq.edu.hk)

By clicking Next, you agree to the above guideline.

**Next**

# 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:

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.									

Del **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	
<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.

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: 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.				

**Add Change**


Category: \*

Please specify below for other category:

Change from: \*

Change to: \*

Reason(s): \*

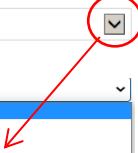


#### Step 4b: Click the pull down button and select the category

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

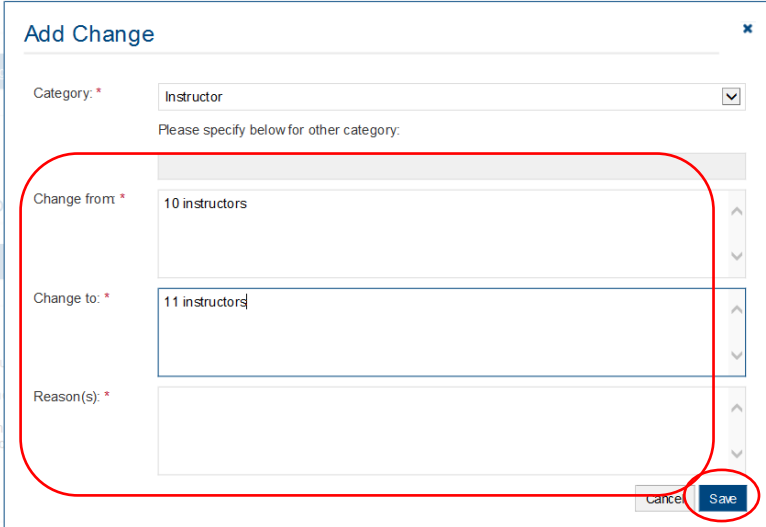


Remarks:

- 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” 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.
- 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 *



The screenshot shows a web form titled "Add Change". The "Category" dropdown is set to "Instructor". Below it, a text prompt says "Please specify below for other category:". The "Change from" field contains "10 instructors" and the "Change to" field contains "11 instructors". The "Reason(s)" field is empty. At the bottom right, there are "Cancel" and "Save" buttons. A red circle highlights the "Save" button.

## 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

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 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 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 Re-assessment of Structured Type 1 Qualified CPD for Licensed Insurance Intermediaries for preparing 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.		
		<input type="button" value="Delete"/> <input type="button" value="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. <i>(*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>(*If there are any updates / applicable to first time application of virtual classroom)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
3.	Copy of Business Registration (BR) / Certificate of Incorporation (CI)  <i>(*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.	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.	<input type="checkbox"/> 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).	<input type="checkbox"/> yes <input type="checkbox"/> not applicable

1

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.	<input type="checkbox"/> 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.	<input type="checkbox"/> yes <input type="checkbox"/> not applicable
8.	Profiles of all instructors or presenters including their academic and professional qualifications, and training/industry experience.	<input type="checkbox"/> yes
9.	Summary of course evaluation results for the reporting period.	<input type="checkbox"/> 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	<input type="checkbox"/> yes <input type="checkbox"/> already stated in the Online Application Form
11.	Sample attendance certificate issued to the CPD participants	<input type="checkbox"/> yes
12.	Passing rate(s) of examination and/or continuous assessment  <i>(*Where applicable)</i>	<input type="checkbox"/> yes <input type="checkbox"/> not applicable

-- END --

2

Step 2: Click **Upload Documents** , then click **Select Files**

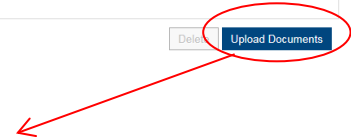
- ❖ *You may put a number of files together into a compressed folder (e.g. zip, rar, 7z) to upload the documents in one go.*

#### 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**

## 3.2 E-learning 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.				

**Add**

**Add Change**

Category \*

Please specify below for other category:

Change from \*

Change to \*

Reason(s) \*

**Cancel** **Add**

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



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.

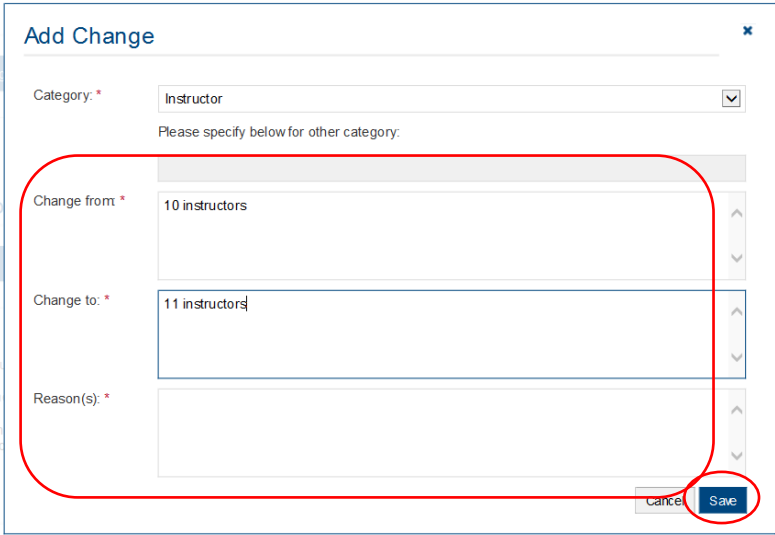
2. No additional fee will be charged for “Changes to be approved in the Next Approval Period” except for change in CPD hours and activity contents for more than 20% in a re-assessment application.

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.

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 *



The screenshot shows a web form titled "Add Change". It contains the following fields:

- Category:** A dropdown menu with "Instructor" selected.
- Change from:** A text input field containing "10 instructors".
- Change to:** A text input field containing "11 instructors".
- Reason(s):** A large empty text area for providing details.

At the bottom right of the form, there are two buttons: "Cancel" and "Save". A red circle highlights the "Save" button.

## 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

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 Insurance Intermediaries for preparing 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):

# Upload Supporting Document(s)

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 Re-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 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 <u>organisational chart</u> . <i>(*if there are any updates)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
2.	Information of <u>organising E-learning programmes / CPD activities</u> . <i>(*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>(*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.	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.	<input type="checkbox"/> 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).	<input type="checkbox"/> yes <input type="checkbox"/> not applicable

6.	List of approved activity venue(s) for the next approval period with full <u>address(es)</u> and <u>capacity(ies)</u> . <i>(*applicable to E-learning Activities with a designated assessment venue)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
7.	Floor plan, rental agreement, insurance coverage for third party liability and/or other possible evidence of activity venue. <i>(*applicable to add a designated assessment venue to E-learning Activities)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
8.	Description of secured login and identity authentication system adopted	<input type="checkbox"/> yes
9.	Profiles of all E-learning administrators / instructors including their academic and professional qualifications, and training/industry experience.	<input type="checkbox"/> yes
10.	Sample End-of-Activity Participant Evaluation Form <i>(*if there are any updates)</i>	<input type="checkbox"/> yes* <input type="checkbox"/> not applicable
11.	Summary of End-of-Activity participants' evaluation results for the last approval period	<input type="checkbox"/> 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	<input type="checkbox"/> yes
13.	Sample attendance certificate issued to the CPD participants	<input type="checkbox"/> 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	<input type="checkbox"/> yes <input type="checkbox"/> already stated in the Online Application Form

	review meeting(s) on monitoring the CPD activity and follow up users' feedback.	
15.	Question bank of <u>EoA/EoM</u> assessment(s) with assessment criteria / model answers	<input type="checkbox"/> yes
16.	Completed Document Checklist with the Availability indicated	<input type="checkbox"/> yes

- END -

Step 2: Click **Upload Documents** , then click **Select Files**

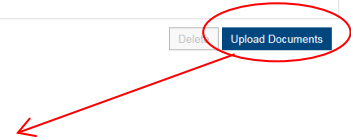
- ❖ You may put a number of files together into a compressed folder (e.g. zip, rar, 7z) to upload the documents in one go.

#### 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: ▼

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

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: 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

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

Upload Proof of Payment

## Payment

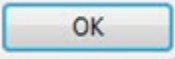
Assessment Fee: \$8,000.00 Payment Method: Bank-Deposit

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 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

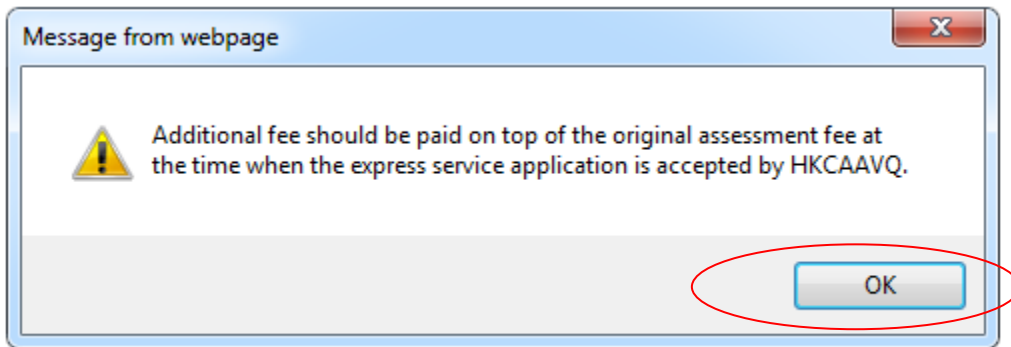
Assessment Fee: \$8,000.00      Payment Method:

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 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](#)

**Re-assessment Application Form**  
The Continuing Professional Development (CPD) Programme for Insurance Intermediaries

LAST UPDATE: 16 June 2015  
This latest version (16 June 2015) replaces all the previous versions of this document.

According to the Assessment Criteria of the Programme, approved CPD activities are subject to re-assessment on an annual basis. An annual re-assessment process will be initiated about 12 months after approval. This exercise is to ascertain whether the number of CPD hours of the CPD activities should remain the same. If approval is not renewed, the approval status of the activity will automatically cease after the approval period.

The HKCAAVQ will not return the application form and any documents received to the activity organizer regardless of the outcome. Any personal data required in this form will be used only for the purpose of applying for re-assessment. Please note that according to the Personal Data (Privacy) Ordinance (Cap. 486), the person concerned has the right of access to and correction of the personal data provided in this form.

To apply for Re-assessment of CPD Programmes for Insurance Intermediaries, please fill in the required information and upload the supporting documents when submitting the Online Application Form. Please refer to the 'General' tab in CPD Activity Organiser\* for payment options of assessment fee. You are advised to settle the payment before submission.

Title of activity: \_\_\_\_\_  
Ref. No.: \_\_\_\_\_  
Name of activity organizer: \_\_\_\_\_  
Existing approval period: From \_\_\_\_ To \_\_\_\_  
Approval period applied for: From \_\_\_\_ To \_\_\_\_  
Number of CPD hours approved in the existing approval period: \_\_\_\_\_  
Target participants: \_\_\_\_\_

**SECTION A Responsible Persons**

	Head of organization/department	Person-in-Charge	Authorized contact person*
Name			
Position			
Organization			
Address			
Phone			
Fax			
E-mail address			

\*The HKCAAVQ will direct inquiries about the application to the authorized contact person, whose name and phone number will be put on the HKCAAVQ Website's approved CPD activities open to the public. Please inform the HKCAAVQ when there are changes in the above information.

**SECTION B Activity Statistics**  
During the approval period:

- Number of times the CPD activity has been held \_\_\_\_\_
- Total number of attendees\* \_\_\_\_\_
- Total number of participants who have successfully completed the activity? \_\_\_\_\_

\*The total number of attendees refers to the number of participants who have registered to the CPD activity. The CPD activity should include a sign-in, please provide an attachment of the sign-in sheet for each of the sessions.

**SECTION C Changes since Last Approval**  
Changes since Last Approval\*  
\*As required by the Assessment Criteria, prior approval of the HKCAAVQ should have been sought for these changes.  
Changes to be approved by the HKCAAVQ (effective from the next approval period):

**SECTION D Quality Assurance**  
Please provide a summary report of the participant evaluation and a brief report of the quality assurance activities conducted during the reporting period such as date(s) & brief contents of course evaluation meeting(s), class observation(s), and follow-up action(s) on identified issue(s) from the participant evaluation.  
In case the CPD participants are required to complete any examination and / or continuous assessment, please provide the passing rate for individual assessment item.

**SECTION E Statement by the Head of Organization/Department**

I will continue to abide by the Assessment Criteria, and declare that all the information provided in this Application Form is accurate to the best of my knowledge. I understand and accept that the HKCAAVQ may approach us direct for further information. I also understand and accept that a non-refundable assessment fee is charged for the assessment work irrespective of the assessment outcome.  
A person who, either orally or in writing, makes any statement or representation or furnishes any information to the HKCAAVQ in connection with the performance of its functions under the 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.

Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Date: \_\_\_\_\_



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'.

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

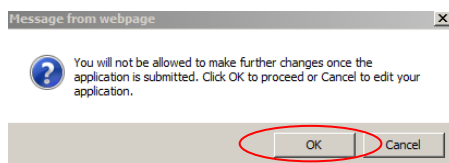
**Submit Application**

Download Application Form

Back **Save as Draft**

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 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**

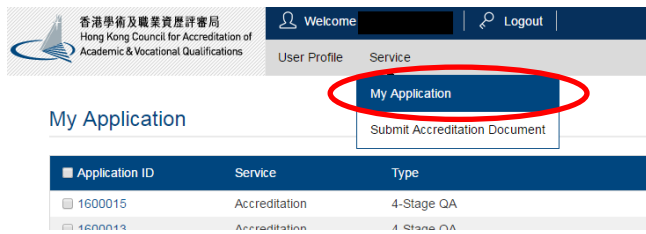
Step 5: The application you submitted to HKCAAVQ will be shown under “My Application”. The status of the application will be changed to “For Review by HKCAAVQ”.

### My Application

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

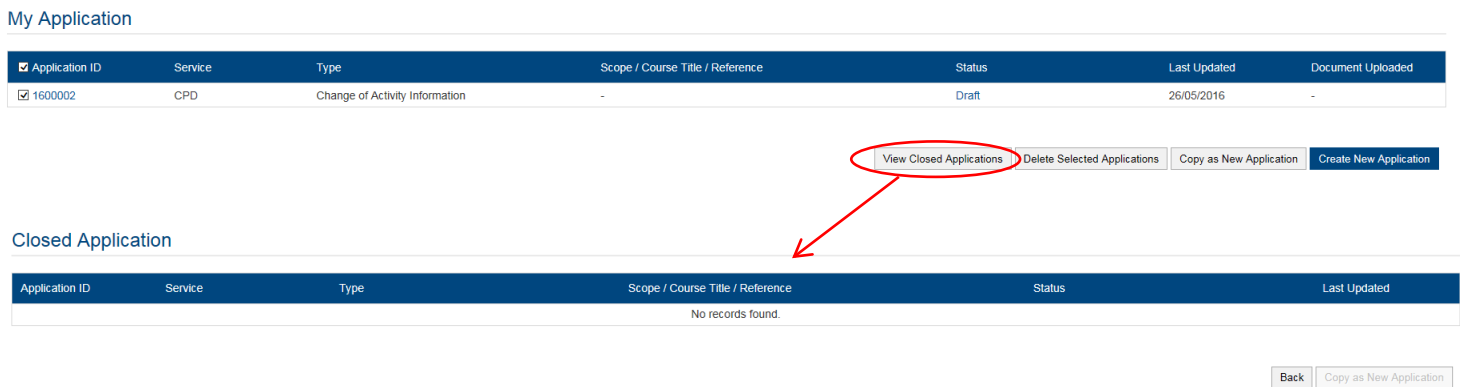
# 6. Special Function

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



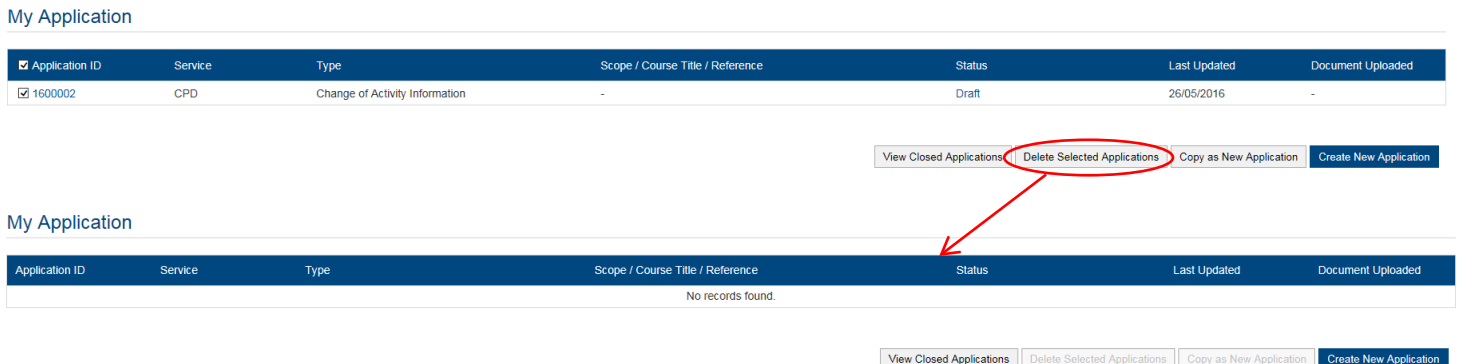
## 6.1 View Closed Applications

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**, and the information of the selected application 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 organizers.

Type of Application: Change of CPD Activity  
 Status: Draft  
 Application ID: 1600003  
 Name of Activity Organisation: Institute of Financial Planners of Hong Kong  
 CPD Ref. No.: 8042/02  
 Title of Activity: English

Created: 26/05/2016 14:44:48  
 Last Updated: 26/05/2016 14:44:48  
 Submitted: -

### Details of Proposed Changes

Category	Change from	Change to	Effective Date	Reason(s)
<input type="checkbox"/> 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
<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.		

[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

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- 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/](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](mailto:cpd_ia@hkcaavq.edu.hk)