

Transitional Practising Certificate Application [Valid until 31 March 2020]

Note: This form should only be completed by new Practising Certificate applicants who believe they may not meet the requirements for the full certificate. All other applicants should complete the full PC application.	
Applicant full name:	
Employer:	
Date admitted as Fellow of the Actuarial Society of South Africa (FASSA)	
Date admitted as a Fellow of the Institute or Faculty of Actuaries (or Other): If "Other", please specify: *(Note that the requirements for the FASSA qualification under the relevant Mutual Recognition Agreements still applies)	
Date of application:	
Are you applying for a qualified Practising Certificate? (If yes, state nature of qualification. Eg reserving only)	

***Note that if the applicant is qualified under an alternative actuarial body other than ASSA, they are still required to have been accepted as a FASSA qualification under the relevant ASSA Mutual Recognition Agreement.**

General Certification	Tick appropriate column	
In my opinion, I have the necessary knowledge, skills and experience to carry out the professional duties required of a Head of Actuarial Function (HAF).	Yes	No
I have read and understand the Code of Professional Conduct (2012).	Yes	No
I have read and understand the ASSA advisory practice notes and standards of actuarial practice relating to short-term assurance.	Yes	No
I am fully aware of the obligations and duties of a HAF or actuary acting in a statutory capacity.	Yes	No
I am employed by a Registered Service Provider (RSP), or am registered as an RSP myself.	Yes	No
I have sufficient time and resources to act in the reserved roles for which the PC will be used.	Yes	No
I have read and understand the applicable regulatory requirements such as the Insurance Act, Short-term Insurance Act, other relevant acts, regulations and regulatory directives and governance and financial soundness prudential standards.	Yes	No
Continuing Professional Development (CPD) Certification	Tick appropriate column	
I certify that each year, for the at least the last four years, I comply with the generic outcomes-based and/or time-based CPD requirements (as the case may be) of ASSA	Yes	No
I certify that each year, for at least the last four years, I completed all necessary formal submissions, declarations and attestations required by the CPD scheme (and am able to supply these on request)	Yes	No

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I certify that each year, for the at least the last four years, I attained a minimum of ten hours verifiable CPD (each year) in the short-term insurance practice area.	Yes	No
I certify that the relevance of the outcome-based and above additional time-based CPD outcomes in attaining and maintaining the skills to practice as a HAF can be demonstrated (specific reference to the duties of the HAF in terms of the governance and financial soundness prudential standards is advisable).	Yes	No
Appropriate Person Questionnaire	Tick appropriate column	
Have you been found guilty of unprofessional conduct in terms of the disciplinary procedures of the Institute / Faculty of Actuaries, the Actuarial Society of South Africa, or any other actuarial association that is a member of the IAA?	Yes	No
Have you been convicted of any serious offence by any court? (Excludes any offence committed when you were under 18 years, unless committed within the last 10 years, any road traffic offence in respect of which a fine was levied; or any political offence for which amnesty has been granted.)	Yes	No
Have you or any short term insurer with which you have been associated as an actuary been subject to legal or ombudsman proceedings where your involvement has been questioned?	Yes	No
Has any regulatory authority raised any professional or actuarial conduct issues with you?	Yes	No
Work Experience Questionnaire	Tick appropriate column	
Do you have at least four years relevant of work experience?	Yes	No
Were at least two of these four years post-qualification as a Fellow member of a professional actuarial body?	Yes	No
Were at least two of these four years spent doing relevant work and working closely with a supporting PC holder (Please refer to definition of a supporting PC holder in Short-term Insurance Practising Certificate Requirements)?	Yes	No
Were at least two years of the experience within the last four years?	Yes	No
Is a substantial period of this experience in relation to (re)insurers registered in the Republic of South Africa?	Yes	No
Undertaking by Applicant	Tick appropriate column	
I acknowledge and accept that a Transitional Practising Certificate is only valid for a period of 12 months.	Yes	No
I undertake to apply for a formal (i.e. non-transitional) Practising Certificate prior to expiry of this Transitional Practising Certificate.	Yes	No
I understand that an appropriate and valid Practising Certificate is required to act in the capacity as HAF of a (re)insurer and that failing to meet this requirement is in breach of APN403. For Short-term (non-life) insurers, the full Practising Certificate requirements only come into full effect from 1 April 2020, therefore a transitional Practising Certificate will be regarded as an appropriate certificate prior to that date.	Yes	No

Signature of applicant, confirming that the above information is accurate:

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Signature

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Name

.....
Date