



**Status of Compliance with Professional Certification and Development Program for Labuan Financial Advisors**  
**Employed by the Labuan Life Insurance Broking Companies as at 31 December 2012**

Name of Labuan Life Insurance Broking Company: \_\_\_\_\_

No	Name	Position	Date of Employment	Current Professional Qualifications	Membership No.		Date of Attendance	No. of Credits (submit list of qualification/credit)
					CII	MII	LLBIC	

I declare that the information provided in this form is correct and complete to the best of my knowledge

\_\_\_\_\_  
 (Full Name as per IC or passport)

**Principal Officer/Director**

\_\_\_\_\_  
 (Name of Company)

**Acronyms:**

CII - The Chartered Insurance Institute

MII - The Malaysian Insurance Institute

LLBIC - Labuan Life Broker Induction Course