



HKIB Professional Qualifications Examination Result Review Request Form

Important Note: This request must be submitted to HKIB within one month of the date printed on your Examination Result Notice.

Section A – Personal Particulars:

Title: Dr/Mr/Mrs/Ms* Surname: _____ Given Names: _____
 Chinese Name (if applicable): _____ Contact No.: _____
 HKID/Passport No.*: _____ Membership No.: _____

* delete wherever appropriate

Section B – Examination Paper(s) for Review:

(Please put a "✓" in the appropriate box)

The rechecking fee is **HK\$500** per subject and remarking fee is **HK\$4,000** per subject

AHKIB **CP** **ABP** **CFMP**

Rechecking

Remarking

Subject(s): 1. _____

Subject(s): 1. _____

2. _____

2. _____

3. _____

3. _____

Total Subject(s) applied: _____

Section C – Payment Method:

The **non-refundable** processing fee for examination result review is paid by:

Cash

Cheque (made payable to "THE HONG KONG INSTITUTE OF BANKERS")

Credit Card

VISA MasterCard Amount HK\$ _____

Name of Cardholder _____

Credit Card No.: _____ - _____ - _____ - _____

Expiry Date: _____ / _____ Signature: _____

Signature: _____

Date: _____

Please return the form to the Examination Department by fax (2544 9946), by post (please mark "Examination Result Review Request" on the envelope), or in person at 3/F Guangdong Investment Tower, 148 Connaught Road Central, H.K.

FOR OFFICE USE ONLY

Reviewed by	Amount	Receipt No.	Sent on:
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