



THE FIDUCIARY INSTITUTE OF SOUTH AFRICA



Registration FISA Board Examination November 2012

1. CANDIDATE INFORMATION (Complete in print letters)

Mr Mrs Miss Other _____ Surname _____

Full names _____

ID/Passport No:

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Postal address

Contact details

PO Box _____

Home tel _____

Suburb _____

Cell no _____

City _____

Work tel _____

Postal code _____

Fax no _____

E-mail _____

2. ACADEMIC RECORD

Qualification: _____

Date achieved: _____

Do you have 2 years or more fiduciary services experience? Yes No

3. EXAMINATION VENUE

Please indicate which centre you will be writing at:

- BLOEMFONTEIN
- CAPE TOWN
- PORT ELIZABETH
- POTCHEFSTROOM

- DURBAN
- PRETORIA
- JOHANNESBURG



Sentrum vir Boedelbeplanningsreg
Centre for Estate Planning Law

T: +27(0)51 401 2823
F: +27(0)51 401 3733
www.ufs.ac.za

205 Nelson Mandela Drive/Ryalaan, Bloemfontein, 9301
PO Box /Posbus 339, Bloemfontein 9300, RSA





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4. EXAMINATION REGISTRATION

I hereby apply for registration of the FISA board examination Fiduciary Practitioner (SA)

1. Law and Ethics in the Fiduciary Services (50 Marks) (Compulsory)

Choose **two** of the following:

2. Estate Planning (50 Marks)
3. Wills Consultation and Drafting (50 marks)
4. Deceased Estate Administration (50 marks)
5. Trust Administration (50 marks)

5. PAYMENT DETAILS

No registration until payment has been verified. Please send proof of payment to crouss@ufs.ac.za

Examination fee R 850

Bank details

Bank: ABSA BRANDWAG
Bank code: 632005
Name of account: University of the Free State
Account no: 4061016246
Reference: ID number

Please sign the agreement _____ (compulsory)

6. CONTACT DETAILS

Administration enquiries: Joyce Leeuw leeuwj@ufs.ac.za
Financial enquiries: Sanet Crous crouss@ufs.ac.za
Examination enquiries: Wessel Oosthuizen oosthuwm@ufs.ac.za



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