

FCA Firm Notification (the completion of all fields is mandatory).

In our capacity as an Awarding Body, we may need to share the data provided in this form with other Awarding Bodies or the Financial Conduct Authority (FCA).

1. Declaration

The person named below, has on behalf of their firm, the authority to inform us of the breach.

I confirm that the information that I have provided in this form is a true and accurate account of the event to the best of my firm's knowledge.

Signature:

(a digital signature is acceptable)

Date:

Name in full:

Job title:

Department:

Telephone number:

(including country and local code)

Email:

On behalf of:

(insert firm name)

Firm Reference Number (FRN):

2. Details of the individual who has breached conditions of their Statement of Professional Standing (SPS)

Name in full:

Individual Reference Number (IRN):

Chartered Banker Institute Membership Number (if known):

3. Details of the breach being reported

Date of the breach:

(If over a period of time, please record the start date and end date).

Date firm made aware of the breach:

Rule or Principle to which the breach relates:

Please give full details of the breach below:

4. What action has the firm taken?

Please give full details below:

5. Event reported to the FCA

Please select the appropriate response below

Yes No

If you have selected Yes above, please provide the date that the breach was reported to the FCA

For office use only

Date FCA Firm Notification Form received

Once you have completed **all of the sections above**, please email the completed form to: qualityandstandards@charteredbanker.com