

CERTIFIED FINANCIAL PLANNER BOARD OF STANDARDS, INC.

1425 K ST NW #800 ■ WASHINGTON, DC 20005

Hearing Panel Volunteer Application (Disciplinary and Ethics Commission)

We are honored that you are interested in serving as a volunteer! Please provide the information below:

SECTION I: Contact Inform	nation	
Name:		
Email:		
Business Name:		
Business Address:		
Preferred Phone:		
SECTION II: Professional	Experience	
Please list and describe your c	urrent and previous positions.	
Position: Description:	Employer:	Dates:
Firm size:		
Position: Description:	Employer:	Dates:
Firm size:		
Position:	Employer:	Dates:
Firm size:		

Volunteer Application	(continued)		
Which of the following business	ess models apply to you?		
Fee-only Financial Pla	nner		
Fee & Commission Fir	ancial Planner		
Commission-only Fina	ncial Planner		
Registered Investmen	Adviser		
Broker-Dealer			
Insurance Company			
Bank			
SECTION III: Previous \	olunteer / Board / Council / Commission	Experience (at CFP Board or Otherwis	e)
Please provide the following	information. Add additional page if necessary.		
Please provide the following	information. Add additional page if necessary. 1	2	
Please provide the following Organization Name		2	
Organization Name		2	
Organization Name Dates of Service		2	
Organization Name		2	
Organization Name Dates of Service Duties or		2	
Organization Name Dates of Service Duties or		2	
Organization Name Dates of Service Duties or Responsibilities Leadership Positions		2	
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Organization Name Dates of Service Duties or Responsibilities Leadership Positions		2	
Organization Name Dates of Service Duties or Responsibilities Leadership Positions Held, if any, and			
Organization Name Dates of Service Duties or Responsibilities Leadership Positions Held, if any, and			
Organization Name Dates of Service Duties or Responsibilities Leadership Positions Held, if any, and Length of Time			
Organization Name Dates of Service Duties or Responsibilities Leadership Positions Held, if any, and Length of Time			

Volunteer Application (continued)

Educational Degrees:		
egree:	Date Received:	College or Institution:
egree:	Date Received:	College or Institution:
egree:	Date Received:	College or Institution:
Licenses, Designations or	· Certifications:	
_		Granting Organization:
		Granting Organization:
		Granting Organization:
ECTION V: Disclosures		
Have you ever had a licen	nse or designation relinquished or revoke	ed? Yes No If yes, please explain below.
Have you ever declared b	ankruptcy? Yes No If yes, plea	ase explain below.
Have you ever declared b	ankruptcy? Yes No If yes, plea	ase explain below.
Have you ever declared b	ankruptcy?	ase explain below.
Have you ever declared b	ankruptcy?	ase explain below.
Have you ever declared b	ankruptcy? ☐ Yes ☐ No If yes, plea	ase explain below.
	ankruptcy? Yes No If yes, plea	
Are you, or have you ever		
Are you, or have you ever ☐ Currently ☐ Ha	been, the subject of any complaints by	
Are you, or have you ever ☐ Currently ☐ Ha	been, the subject of any complaints by	
Are you, or have you ever ☐ Currently ☐ Ha	been, the subject of any complaints by	
Are you, or have you ever ☐ Currently ☐ Ha	been, the subject of any complaints by	
Are you, or have you ever ☐ Currently ☐ Ha	been, the subject of any complaints by	
Are you, or have you ever Currently Harease explain:	been, the subject of any complaints by a	a client?
Are you, or have you ever Currently Harlease explain:	been, the subject of any complaints by a	
Are you, or have you ever Currently Ha ease explain: Are you, or have you ever government agency? Currently Ha	been, the subject of any complaints by a	a client?
Are you, or have you ever Currently Har lease explain: Are you, or have you ever government agency?	been, the subject of any complaints by a ve Been \text{No} \text{No} \text{been, investigated or disciplined by any}	a client?

SECTION VI: Open-Ended Questions

Please respond to the following	a open-ended questions.	Add additional pages if necessary.
i icase respond to the following	a openi-chaca questions.	Add additional pages if fielessary.

1. Please describe your specific qualifications that position you to be an effective Hearing Panel Volunteer.				
1. Floude december your epecinic qualifications that postder you to be an encourse flouring fund. Volunteen.				
2. Have you ever reviewed and analyzed large quantities of documents? If so, please describe.				
3. Have you ever been a member of a group that was responsible for making an important decision? If so, describe your interaction with the other decision makers and the contributions you made to the decision-making process.				
with the other decision makers and the contributions you made to the decision-making process.				

Volunteer Application (continued)

4. A CFP® professional has borrowed money from a client. Should CFP Board's Disciplinary a professional? If so, what sanction would be appropriate? Explain your reasoning.	and Ethics Commission discipline this	
5. Serving as a Hearing Panel Volunteer requires a substantial time commitment, and involve meetings, conference calls, and other commitments. How will you be able to meet this response		
6. What else should we know about you that is not reflected elsewhere in this Application?		
SECTION VII: Submittal and Acknowledgement		
I agree that everything on and attached to this form is correct and accurate to the best of my knowledge.		
Signature:[Date:	
Send your completed application by mail or email to:		

CFP Board Attn: Erin Koeppel, Esq. Director of Adjudication

1425 K Street NW # 800 Washington, DC 20005 Email: ekoeppel@cfpboard.org