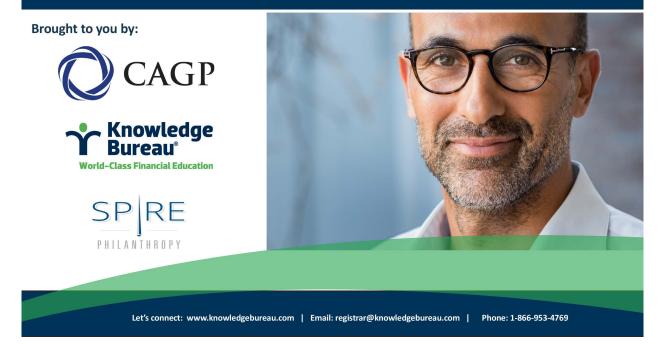
THE MFA-P™ PHILANTHROPY DESIGNATION



MFA-P™ (MASTER FINANCIAL ADVISOR - PHILANTHROPY) SPECIAL PRIVILEGES APPLICATION FORM

CAGP, Knowledge Bureau and Spire Philanthropy have collaborated to create a prestigious new designation program for advisors with a keen interest in strategic philanthropy.

About The MFA-P™ Philanthropy Program. The MFA-P™ (Master Financial Advisor - Philanthropy) addresses three key benefits for advisors and their clients: how to incorporate philanthropy into their practice in pragmatic terms, how to focus on gift planning strategies and vehicles that are relevant to clients' goals and how to provide and share practical experience through numerous working case studies that allow advisors to apply that knowledge. Please review detailed program descriptions and the Standards of Conduct and Proficiency Requirements.

SPECIAL PRIVILEGES OPPORTUNITY. This route to receiving the MFA-P[™] designation is reserved for the most experienced charitable gift planners. In order to qualify under this route, candidates must submit a detailed case study and meet or exceed experience criteria. Each application is subject to the review of the MFA-P[™] Advisory Board and each successful candidate must have the approval of that Board.

It is reserved for those who are further down curve with their experience and knowledge and can demonstrate what it takes to be a sophisticated charitable gift planner – both financial advisors and others working in the charitable sector — an important opportunity will be provided to designate those who want to have the MFA-P™ designation from a leadership point of view. A select number of leaders will be selected for grandfathering into the program based on the criteria in the application form attached.

Access to the MFA-P™ Program: Special privilege candidates will be enrolled in the program from the time of application and may wish to complete any portion of the program over a three month period of time to have the base of knowledge to champion the program as a leader, mentor students if asked and become an influencer for high standards of proficiency in regards to the program.

FEE: an application fee of \$995 plus taxes must be submitted by the deadline. ©Knowledge Bureau, Inc.

DEADLINE FOR SPECIAL PRIVILEGES APPLICATION: JUNE 30, 2020.

REQUIREMENTS. An individual will be eligible to receive the MFA-P designation without completing the standard coursework and exams if they:

- **A. Provide a detailed resume** which outlines past and current areas of practice and experience in the area of strategic charitable gift planning
- **B.** Complete a Case Study (of a minimum of 2000 words) to be shared with MFA-P[™] students and graduates, according to prescribed case study outline, based on a real-life client situation in the following subject areas found in section 5 below.
- C. Meet at least three (3) of the following four (4) criteria:
 - Membership in good standing with the Canadian Association of Gift Planners (CAGP) for a minimum of FIVE years
 - Minimum of 10 years of appropriate and relevant experience in the area of strategic charitable gift planning
 - Completion of CAGP's Original Gift Planning Course
 - Holding one of the following degrees/designations: CFP, CHS, CLU, CPA, DFA-Tax Services Specialist™, LLB, MFA™, MTI, PI. Fin, RFP, RWM™, TEP

AND

• Have the approval of the MFA-P™ Advisory Board

AND

Complete the prescribed application form below and submit the course tuition fee.
 See below

MFA-P™ APPLICATION FORM - CANDIDATES FOR SPECIAL PRIVILEGES

SECTION 1 – PERSONAL DETAILS

| Title | |
|--------------------|--|
| First Name* | |
| Last Name* | |
| Date of Birth | |
| Gender | |
| Phone Number* | |
| Mobile Number* | |
| Home Address* | |
| City and Province* | |
| Postal Code* | |
| Personal Email* | |
| Work Email | |
| | |

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^{*}Indicates mandatory field

SECTION 2 - WORK HISTORY (10 YEARS). If you have worked at more than two firms over the past 10 years, please provide full details in your resume.

| Current Firm Name | |
|-----------------------------|--|
| Address | |
| City, Province | |
| Postal Code | |
| Phone at Work | |
| Email at Work | |
| Current Role Title | |
| Department | |
| Employment Duties | |
| Employment Dates | |
| | |
| Immediately Prior Firm Name | |
| Address | |
| City, Province | |
| Postal Code | |
| Current Role Title | |
| Department | |
| Employment Duties | |
| Employment Dates | |
| | |
| Self Employment Details | |
| Name of Firm | |
| Address | |
| City, Province | |
| Postal Code | |
| Phone at Work | |
| Email at Work | |
| Your Current Role | |
| Years in Business | |
| Number of Employees | |

| | | ICE. Please state the num Years | ber of years of experience you have in the Months | | |
|--|---|---------------------------------|---|--|--|
| | | tise relating to charitable | | | |
| | Charitable Trusts Donor Advised Funds Estate Administration Estate Planning Fundraising/Planned G Investment Manageme | Siving | ☐ Insurance ☐ Tax Planning ☐ Philanthropic Advisory ☐ Portfolio Management ☐ Private Foundations ☐ Other (please specify below) | | |
| SECTIO | N 4 - MEMBERSHIPS AND | DESIGNATIONS | | | |
| | Bar Associations: CFP CHFC CHS CLU CPA DFA-Tax Services Spec LLB MFA™ MTI PI.Fin RFP RWM™ TEP | | | | |
| SECTION 5 – CASE STUDY. Please submit a Case Study to be shared with MFA-P students and graduates, according to the prescribed case study outline, based on a real-life client situation in the following subject areas. It is not required that this is attached with this application form, but rather, that it is submitted by the special privileges deadline of June 30, 2020. | | | | | |
| | □ Inter-generational implications of gifting □ Age-related health transitions: managing the strategic gift plan □ Process for securing the charitable gift □ Recent Issues/changes in the charitable sector □ Setting up a private foundation | | | | |

The MFA-P™ Advisory Board will contact you with prescribed case study outlines and details.

Section 6 – Declaration

I herewith submit my application form and intention to contribute to the continuing professional development of distinguished advisors working with clients in developing charitable giving plans.

I agree to abide by Standards of Conduct as outlined by Knowledge Bureau, attached in this application form, should I be successful in the selection for Special Privileges by the MFA-P™ Advisory Board.

I agree to re-certification in writing annually by December 31. Quarterly transcripts will be provided.

My application fee of \$995 plus tax is attached. I understand this will be returned to me should I not be accepted by the Board.

| | · |
|--------------------------------------|---------------------------|
| | |
| Signature above, printed name below | Date above; witness below |
| | |
| MFA-P™ ADVISORY BOARD ACCEPTANCE/REJ | JECTION COMMENTS: |
| DATE OF ADJUDICATION | |
| ADVISORY BOARD: | |
| NAME | |
| NAME | |
| NAME | |
| ACCEPTANCE. REASONS: | |
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| REJECTION. REASONS: | |
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| SIGNATURES | |
| ADVISORY BOARD: | SIGNATURES |
| PRINT NAME | |
| PRINT NAME | |

PRINT NAME

Section 7 – Payment

| Name | | | | | |
|--------------------------------------|------------------------------------|---------------------------------|--|--|--|
| Designations/Licenses | | | | | |
| Company Name | | | | | |
| Address | | | | | |
| City, Province | | Postal Code | | | |
| Email | | | | | |
| Phone (primary) | | Phone (cell) | | | |
| | | | | | |
| MFA-P™ Special Privileges Fee | | | | | |
| Referred by: | | | | | |
| L | | | | | |
| PAYMENT OPTIONS | | | | | |
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| Fees: □Visa | ☐ Mast | erCard | | | |
| Card Number: | | | | | |
| Expiry: | | | | | |
| Signature: | | | | | |
| Taxes | \$ | | | | |
| Total | \$ | | | | |
| | | | | | |
| HOW TO APPLY | | | | | |
| Fax: 1-204-953-4762 | Email | : registrar@knowledgebureau.com | | | |
| | | | | | |
| ATTACH SUPPORTING DOCUMENTATION HERE | | | | | |
| Check the documentation included: | | | | | |
| ☐ Detailed resume | ☐ Application Form | ☐ Case Study | | | |
| | at a later date. Note: must be sub | mittad hafara luna 20, 2020 | | | |