



The Arab Academy  
for Banking and Financial Sciences



*“The Academy of all Arabs”*

*“Be Certified”*

### Certification Candidate Application

**Please check designation desired:**

- |  |  |
|--|--|
| <input type="checkbox"/> (CLBB) Certified Lender Business Banker | <input type="checkbox"/> (CFMP) Certified Financial Marketing Professional   |
| <input type="checkbox"/> (CBM) Certified Branch Manager          | <input type="checkbox"/> (CTFA) Certified Trust and Financial Advisor        |
| <input type="checkbox"/> (CGB) Certified General Banker          | <input type="checkbox"/> (CSOP) Certified Securities Operations Professional |

**CCFB USE ONLY**

- EXP     REF     EDC     ETH     ACT

**Applicant Information (Please Type or Print: Omitted information may cause delays in processing your application)**

Name

Title

Organization

City

Country

Mailing Address

Daytime Phone

Home Phone

Fax

Mobile

Email

Would you like your correspondence sent to your  Office  Home?

Home Address

Apartment

City

State

Zip

How did you hear about us?

- |   |  |   |                                       |
|---|--|---|---------------------------------------|
| <input type="checkbox"/> AABFS Training | <input type="checkbox"/> Advertisement | <input type="checkbox"/> Colleague/ Word of Mouth | <input type="checkbox"/> Direct Mail  |
| <input type="checkbox"/> AABFS Event    | <input type="checkbox"/> Supervisor    | <input type="checkbox"/> Website                  | <input type="checkbox"/> Other: _____ |

**Professional Experience**

Eligibility requirements for your selected designation state that candidates must possess professional experience in the area for which they are seeking certification. Please provide the work experience information requested in the space provided. Please review the appropriate certification program overview if clarification regarding applicable professional work history is required.

Total years of professional work history in the applicable area of expertise: \_\_\_\_\_

Was this work history gained within the last 5 years?  yes  no If no, explain

**Applicant Information (Please Type or Print: Omitted information may cause delays in processing your application.)**

Date of employment with current employer \_\_\_\_\_

Describe your primary work responsibilities:

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If you have fewer than the required minimum years of professional work experience with your current employer, please indicate applicable previous professional work experience in the space provided or attach an up-to-date resume.

Previous employer \_\_\_\_\_

Dates of employment: \_\_\_\_\_ to \_\_\_\_\_

Describe your primary work responsibilities:

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**Education**

**Please check the highest level of formal education completed:**

- High School                       Partial College                       Bachelor's Degree  
 Master's Degree                       Doctoral Degree

**(Please attach a separate sheet if more space is required)**

Candidates must provide an inventory of professional education and training activities completed prior to applying for certification so that its applicability for credit may be assessed. Please review the appropriate certification program overview and continuing education fact sheet if clarification regarding the pre-certification continuing education requirements are needed.

<b>Education/Training Activity</b>	<b>Length (minus break &amp; meal time</b>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
Grand Total	_____

#### Exam Selection Preferences

Please indicate your preferred examination date in the space provided. For participants outside the Hashemite Kingdom of Jordan, the Center of Certified Financiers & Bankers will arrange an examination date through The Arab Academy offices & Branches in the Arab Region.

Preferred examination date \_\_\_\_\_

Second examination date choice: \_\_\_\_\_

- My letter(s) of recommendation is (are) attached.
- I have read and signed the professional ethics statement on the next page of this application.

#### **Completed application and required documentation to:**

**Center of certified Financiers & Bankers - Arab Academy for Banking and Financial Sciences**

**Tel: (009626) 5502900 ext: 180 - Fax: (009626) 5237834**

**P.O. Box: 13190 - Postal Code: 11942 - Amman - Jordan**

**E-mail: [ccfb@aabfs.org](mailto:ccfb@aabfs.org)**

**[www.aabfs.org](http://www.aabfs.org)**

## CCFB & ICB Professional Code of Ethics

**Preamble:** The Center of Certified Financiers & Bankers (CCFB) and the Institute of Certified Bankers (ICB) recognizes the importance of promulgating a code of ethics that emphasizes the conduct, competency, knowledge, professionalism, integrity, objectivity, and responsibility of each person qualifying as a candidate for certification. Therefore, the Board of Directors of CCFB and ICB have received and adopted the following Code of Ethics:

**Whereas:** Certified professionals must maintain a high standard of conduct, competency, knowledge, professionalism, integrity, objectivity, and responsibility as they discharge their duties in the practice of their profession.

**Therefore,** let it be known, that the Code of Ethics embodies the standards of professional behavior expected of all certified members of the Center of Certified Financiers & Bankers (CCBF) and the Institute of Certified Bankers (ICB).

Therefore, I, by applying for certification and applying for membership in The Center of Certified Financiers and Bankers and the institute of Certified Bankers, agree to abide by the Code of Ethics of the CCFB and ICB at all times. Furthermore, I understand that I have a responsibility to all those who use in professional services. This includes customers, other financial institutions, governments, investors, the business and financial community, and all others who rely on the performance of my duties. I agree to:

1. Conduct my professional affairs in a manner that avoids a conflict of interest or the appearance of a conflict of interest. If I become a party to a conflict, or the appearance of a conflict is created, I shall inform my supervisor as soon as possible.
2. Conduct my personal and business affairs in a manner that does not damage the reputation of my employer. If self-employed, conduct my personal and business affairs in a manner that does not damage the reputation of my company.
3. Place my employer's interest above my own in all business matters, and exhibit a high degree of loyalty to my employer and to whomever I am rendering a service.
4. Owe a solemn duty to uphold the integrity and honor of my profession and to encourage respect for it. I further agree to promote the continual development of the financial services industry, as well as my respective specialization.
5. Avoid any activity that might create the appearance of potential personal financial instability such as excessive gambling, excessive indebtedness or excessive speculation.
6. Not use information that is not publicly available to invest in the stock of a company that is a customer, borrower, client or supplier of my employer, or share such information with the investment department or investment banking subsidiary of my employer, unless it is legally permissible.
7. Safeguard the confidential nature of information concerning the business transactions and condition of my employer and of my employer's present and prospective customers, clients, borrowers or suppliers, except where disclosure of such confidential information is required by state or federal law or regulation.
8. Not have signed, nor will I sign, a consent decree with the Securities and Exchange Commission (SEC) or any state securities agency or be found guilty nor will I be found guilty in a competent court of jurisdiction or a federal or state regulatory proceeding of any of the following offenses: (1) securities law violations; (2) embezzlement; (3) fraud; (4) fraudulent conversion; (5) misappropriation of funds; (6) restraint of trade; (7) knowingly filing a false report with a federal or state bank or bank holding company regulatory agency; (8) failure to comply with any law or regulation governing the reporting or disclosure of a conflict of interest; (9) willful failure to file a state or federal income tax return; (10) violation of state or federal election campaign laws; and (11) participation in violations of the Bank Secrecy Act.
9. Strive to become and remain proficient in carrying out my professional duties. If I accept responsibility for handling new and unusual professional activities, but I find that beyond my competency, then I agree that I am expected to become competent by diligently undertaking the work and study necessary to qualify myself, or to obtain the assistance of a professional possessing the necessary skills or competency.
10. Use reasonable care in expressing opinions involving and related to the performance of my professional duties, and obtain sufficient evidence to warrant an opinion.

**As evidenced by my signature below, I have read and understand the information provided regarding eligibility requirements as well as CCBF's & ICB's Professional Code of Ethics statement and I wish to apply for certification with the Center of Certified Financiers & Bankers and the Institute of Certified Bankers. I attest that all information that I have provided on this application and its required supporting documentation is correct. I further agree to abide by the stated code of ethics and program requirements as long as I remain a candidate for certification or a certified member of the Center of Certified Financiers & Bankers and the Institute of Certified Bankers.**

\_\_\_\_\_  
Candidate Name

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date

Center of Certified Financiers and Bankers

Institute of Certified Bankers