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ACADEMIC MEMBERSHIP APPLICATION

Please print or type

Mr. Mrs. Ms. Dr. _____
 Surname First Name Initial

Name of University or College: _____

Work address: Street _____ City _____ Province _____ Postal Code _____

Work: Telephone Number _____ Fax Number _____ E-Mail Address _____

Residence address: Street _____ City _____ Province _____ Postal Code _____

Residence: Telephone Number _____ Fax Number _____ E-Mail Address _____

Title: _____ Date of Birth: _____

How Long in Present Position _____ Certification: CA CPA Other _____

Education

Name of College or University	Year of Graduation	Degree

Other Memberships (List names of other professional and technical organizations):

PLEASE NOTE: Only educators with the academic rank of Dean, Assistant Dean, Associate Dean, Professor, Assistant Professor or Associate Professor are eligible for Academic Membership.

A copy of your CV must accompany this application for membership.

FEI Canada CODE OF ETHICS

FEI Canada's mission includes significant efforts to promote ethical conduct in the practice of financial management throughout the world. Senior financial officers hold an important and elevated role in corporate governance. While members of the management team, they are uniquely capable and empowered to ensure that all stakeholders' interests are appropriately balanced, protected and preserved. This Code provides principles to which members are expected to adhere and advocate. They embody rules regarding individual and peer responsibilities, as well as responsibilities to employers, the public, and other stakeholders. Violations of FEI Canada's Code of Ethics may subject the member to censure, suspension or expulsion under procedural rules adopted by FEI Canada's Board of Directors.

All members of FEI Canada will:

- ✓ Act with honesty and integrity, avoiding actual or apparent conflicts of interest in personal and professional relationships.
- ✓ Provide constituents with information that is accurate, complete, objective, relevant, timely and understandable.
- ✓ Comply with applicable rules and regulations of federal, state, provincial, and local governments, and other appropriate private and public regulatory agencies.
- ✓ Act in good faith, responsibly, with due care, competence and diligence, without misrepresenting material facts or all owing one's independent judgment to be subordinated.
- ✓ Respect the confidentiality of information acquired in the course of one's work except when authorized or otherwise legally obligated to disclose. Confidential information acquired in the course of one's work will not be used for personal advantage.
- ✓ Share knowledge and maintain skills important and relevant to constituents' needs.
- ✓ Proactively promote ethical behavior as a responsible partner among peers, in the work environment and the community.
- ✓ Achieve responsible use of and control over all assets and resources employed or entrusted.
- ✓ Report known or suspected violations of this Code in accordance with the FEI Rules and Procedure.
- ✓ Be accountable for adhering to this Code.

APPLICATION I hereby apply for membership in Financial Executives International Canada and certify that I meet the admission criteria as set out in this form. When admitted, I agree that my business and personal conduct shall at all times be entirely consistent with the Code of Ethics of the Institute and in compliance with the Bylaws and all rules adopted by the Board of Directors.

Date

Signature

PAYMENT METHOD

Enclosed is my cheque or money order in the amount of **\$315 + applicable provincial taxes** payable to FEI Canada

(\$210 annual dues + \$90 chapter dues + applicable provincial taxes:

*AB, MB, PE, SK: \$300 + \$15 GST = **\$315.00***

*BC: \$300 + \$36 GST/HST = **\$336.00***

*QC: \$300 + \$38.63 GST/QST = **\$338.63***

*NB, NL, ON: \$300 + \$39 GSH/HST = **\$339.00***

*NS: \$300 + \$45 GST/HST = **\$345.00***)

GST Registration #107383002RT, QST # R1206801472

Please charge \$ _____

to my Visa MasterCard American Express

Card Number _____

Expiry Date _____

Card Holder's Name _____

Card Holder's Signature _____