## **Authorization Letter**

To: PEAK Examination Centre, Vocational Training Council 1/F, 27 WOOD RD, VTC TOWER, WANCHAI HK

I hereby authorize( <sup>@</sup> I on my behalf to collect:	H.K.I.D. Card No/ Passport No)
* □ Certificate(s)	
* □ Notification of Result(s)	
* □ Receipt(s)	
of	
* ☐ Insurance Intermediaries Qualifying Examination	
( <sup>®</sup> Principles and Practice of Insurance / General Insurance / Gen	surance / Long Term Insurance /
Investment-linked Long Term Insurance / Travel In	surance Agents)
*   Mandatory Provident Fund Schemes Examination	
* □ Trade Test for Security Guards	
*   Leveraged Foreign Exchange Trading Examination	
. I understand that my authorized representative is require checking.	ed to produce <sup>@</sup> his/her <sup>@</sup> HKID Card / Passport for identity
A photocopy of my <sup>@</sup> HKID Card / Passport is also encl	osed for your verification.
Name of Authorizer (Block Letters)	Signature of Authorizer
HK ID/ Passport No.	Date
* Please tick "✓" as appropriate <sup>@</sup> Please delete i	f inappropriate
	For official use only
	Identification verified
	Date Signature of Responsible Staff