

Sample of Testimonial Letter for Insurance / Unit Trust/Will Writing Agents and Remisiers

Please print on the Company's Letterhead. Original copy of letter must be sent to FPAM. Fax copy alone will not be entertained.

Date:

Membership Department
Financial Planning Association of Malaysia
Lot 16-02, 16th Floor
Block B, HP Towers
(Formerly known as Wisma Semantan)
No. 12 Jalan Gelenggang
Bukit Damansara
50490 Kuala Lumpur

Dear Sir,

Re: Reference Letter

This is to confirm that Mr/Mrs/Ms(IC No.....) has an insurance/unit trust/will writing agent/remisier in (Name of company) since

Please give a brief description of services rendered and also number of years as an insurance/unit trust/will writing agent or remisier with the respective organization. Please also indicate if the agency contract with the organization is on a full time or part time basis.

Note:

Please indicate progression of career and allow 1 paragraph for each level of job progression. This letter should cover a period of at least 3 years within the 5 years preceding the date of this letter. If the applicant has been in the present organization for less than 3 years, he/she is required to obtain a testimonial letter from his/her prior organization/ employer(s).

The number of points listed below is a sample only and is not exhaustive. Please provide complete list of services provided and career progression.

1. June 1998 to May 2000 – Life Insurance Agent

Briefly describe services rendered during this time.

2. June 2000 to July 2003 – Agency Supervisor

Briefly describe services rendered during this time.

3. August 2003 till to date – Agency Manager

Briefly describe services rendered during this time.

Please also include details and proof of any awards or achievements received as this would assist in the evaluation of the application.

He/She is a member of (Please list name of professional bodies of which applicant is a member).

Please also provide character reference for applicant wherever possible.

The company is proud to support his/her application to be a Certified member of the Financial Planning Association of Malaysia.

Yours sincerely,

Name:

Designation:

(To be signed by personnel from the Human Resources Department/General Manager or other senior management staff)