

2025 FCAQ APPLICATION FOR NEW AFFILIATE MEMBERSHIP

This application form should be read in conjunction with the FCAQ Membership Policy available on the FCAQ website. To assist in the processing of this application for membership, please note the following:

1. This form is for individuals seeking new Affiliate Membership with FCAQ. If you are renewing your membership as an Affiliate member, please complete the "2025 FCAQ Renewal of Affiliate Membership".

2. The completed membership application form, together with supporting documentation, should be emailed to membership@fcaq.org.au with the following in the subject title, "<surname> new affiliate membership". FCAQ will only accept forms that are sent by email to above email address.

3. Affiliate Membership would be appropriate for a broad range of individuals such as: financial literacy educators, financial capability workers, NLS workers and emergency relief providers providing financial literacy education, Associate financial counsellors between employment positions, training providers, and related sector stakeholders.

4. When applying for a new Affiliate Membership:

- (a) A letter or email correspondence must be attached to this application, demonstrating a fundamental link between the applicant and FCAQ. The applicant must demonstrate that an Affiliate membership would be of benefit to FCAQ and its members.
- (b) If the applicant is an individual employed by, or volunteering in, a Queensland non-profit community service organisation that provides financial counselling, financial capability, or financial resilience services, please provide evidence confirming that the services are free of charge.
- (c) The Applicant Declaration must be completed and signed.

5. Assessment Process:

If you are approved for membership, you will receive an invoice for the calendar year fee, which is payable within 14 days of notification.

If you are not approved, you will be advised in writing that:

- (a) Your membership application has been declined, together with the reason; or
- (b) your membership application has been declined pending receipt of further information and the resubmission of the completed application form.

6. When your membership application is approved by FCAQ you will be issued with an invoice for payment of your membership fee. Please note if you are changing your membership category during the membership year, you will need to pay the difference between the Affiliate fee paid and the new membership fee, if applicable. All memberships are due for renewal on 1st January each year.

► **Please note:** *no fees are to be paid to FCAQ until you have been advised that all membership requirements have been met and a tax invoice has been provided.*

7. New membership commences when your payment is received and receipted by FCAQ. At that time, FCAQ will issue a Membership Certificate, provide access to FCAQ Members Toolkit, and the Financial Counselling Australia (FCA) toolkit and add your email to the FCAQ Members group email.

For the 2025 Membership year, I am applying for membership as an:

AFFILIATE MEMBER (* required information)

Name: *	
Date of Birth: *	
Mailing address: *	
Email address: *	
Direct Phone number: *	
Your current position title/s: *	
Date commenced in this role: *	

Organisation/Employer*	
Organisation/Employer phone: *	
Organisation /Employer mailing address: *	
Agency Manager's name and email address: *	
Organisation Type: For profit / not for profit / Government: *	

For all new Affiliate Membership applicants

Have you attached required evidence (email correspondence or letter) with this application, including the information set out in Paragraph 4 of the guidance notes above?

Yes No - please contact FCAQ staff as you may not meet membership requirements.

Are these services free of charge?

Yes No - please contact FCAQ staff as you may not meet membership requirements.

Applicant Declaration

I, _____ in making this application for membership of the Financial Counsellors' Association of Queensland, acknowledge and agree to the following:

1. The information that has been provided on this form, and on any attachments to it, is complete and correct in every detail.
2. Read the FCAQ Membership Policy and the Australian Financial Counselling Code of Ethical Practice and agree to uphold them.
3. A member must advise FCAQ immediately of a change in circumstances relating to any information I have provided in or with this application.
4. No objection to any relevant person(s) being contacted to assist in determining my eligibility for membership and understand that FCAQ may, at times, need to discuss my membership with my employer.
5. A membership certificate will not be processed until all parts of this form are completed and lodged with FCAQ and payment has been processed.
6. Have met and agree to meet in the future the Constitution, By-Laws, Codes of Conduct and Policies & Procedures of FCAQ.
7. Will provide proof of my adherence to the above when required.
8. Understand that the Association has agreed to the national standard Disciplinary Process - Policy and Procedures and that these govern how the Association assesses, handles, and responds to complaints about Members. Accordingly, members are bound by the Disciplinary Process - Policy and Procedures.
9. Where a complaint is made about a member, the member consents to the Association and any investigator appointed by the Association:
 - (a) Asking my employer, former employer, a client or former client, a co-worker or anyone else for relevant information and to the extent necessary to do so disclosing information to them about the complaint; and
 - (b) obtaining any personal information from the current employer, a former employer, a client or former client, a co-worker or anyone else, in each case to the extent that the personal information appears to be relevant to the matters, the subject of the complaint.
10. The Membership Application may be provided to anybody by way of evidence consented by the member to the Association, asking for and obtaining information about me for the purposes of handling a complaint.
11. If membership of the Association is suspended or terminated, the Association may through Financial Counselling Australia make that information available to the financial counselling associations in other States and Territories of Australia.

Applicants Full Name: _____

Applicants Signature: _____

Date of Signature: _____