



UNIVERSITY OF CALIFORNIA, SANTA BARBARA
 Department of Statistics and Applied Probability
 Santa Barbara, California 93106-3110



Actuarial Exam Fee Reimbursement Program

Program Goal: Due to the generosity of several companies, we are offering the “student fee” reimbursement of the professional actuarial exams for students who **pass beyond their first exam taken**. The reimbursement program will continue as long as we have funds. We are actively seeking more funding so we can continue to reimburse students. The reimbursement will only apply towards the “student fee” SOA pricing structure.

The following documents must be submitted to the Department of Statistics and Applied Probability (South Hall 5607B):

- **Copy of Official Passing Grade.** This may be found on the Society of Actuaries website under MY PROFILE under GRADE SLIP. The actual grade must be shown.
- **COPY of Payment.** This may be found on the Society of Actuaries website under MY PROFILE under ORDER HISTORY. It must include a method of payment and amount paid.
- **Copy of Passport/Picture Page & Form I-94.** This is a requirement for students on F1 Visas. Also, bring your original passport to the office for verification

In addition,

- You **MUST** be officially in the UCSB PSTAT department major when you take the exam, AND when you apply for reimbursement. (Intending to transfer into a PSTAT major does not count. Ineligibility also applies once you have graduated.)
- You **MUST** be a paid Actuarial Club member.
- Reimbursement requests must be received within 60 days of your notice of passing. Documents **must be** a formal notice (with test score) transmitted or mailed to you by the actuarial societies.

Take this and all Receipts to the Department of Statistics and Applied Probability (South Hall 5607B)

Name: _____ Date: _____

Address: _____ PERM: _____
 (Please use the mailing address of where you would like your reimbursement posted.)

State & Zip: _____ Expected date of graduation: _____

Email address (other than umail): _____

List exam(s) to be reimbursed: _____

List other exams you have passed: _____

Internship held: _____

Job offers: _____

Confirmation of the above information

Student Signature _____

SIGNATURE	(For Office use only)
<p style="text-align: center;">_____ Signature of Director of Actuarial Program</p>	<p style="text-align: center;">_____ Date</p>

If you have any questions regarding this form contact the Undergraduate Program Assistant by email at actuary_co@pstat.ucsb.edu