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By checking this box I certify that I have met the Precertification Standards and agree to abide by the Principles of Conduct as outlined at www.cebs.org/policies. I understand that the International Foundation of Employee Benefit Plans and the Wharton School of the University of Pennsylvania reserve the right to provide the following information upon inquiry from the instructor, university or employer of the respective candidate: name and address, examinations successfully completed and examination applications for courses.

CEBS Order Summary

Course	PACKAGE includes Study Guide, textbook, exam and Online Study Group. (Package option is only available at the initial time of purchase.)	COURSE MATERIALS		VIRTUAL EXAM \$565 (each)*			ONLINE STUDY GROUP \$260 (each)			Subtotal per Course
		Study Guide	Textbook	Exam Window	Year	CE	Session	Year		
GBA 1 Directing Benefits Programs Part 1	<input type="checkbox"/> \$1,032 Indicate desired exam window and Online Study Group session at right.	<input type="checkbox"/> \$270 USGBA1KIT22	<input type="checkbox"/> \$195 USGBA1T22	<input type="checkbox"/> W1 <input type="checkbox"/> W2 <input type="checkbox"/> W3 <input type="checkbox"/> W4	_____	<input type="checkbox"/>	<input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall	_____	\$ _____	
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GBA/RPA 3 Strategic Benefits Management	<input type="checkbox"/> \$1,056 Indicate desired exam window and Online Study Group session at right.	<input type="checkbox"/> \$270 USGBARPA3KIT22	<input type="checkbox"/> \$225 USGBARPA3T22	<input type="checkbox"/> W1 <input type="checkbox"/> W2 <input type="checkbox"/> W3 <input type="checkbox"/> W4	_____	<input type="checkbox"/>	<input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall	_____	\$ _____	
RPA 1 Directing Retirement Plans Part 1	<input type="checkbox"/> \$1,020 Indicate desired exam window and Online Study Group session at right.	<input type="checkbox"/> \$270 USRPA1KIT	<input type="checkbox"/> \$180 USRPA1T24	<input type="checkbox"/> W1 <input type="checkbox"/> W2 <input type="checkbox"/> W3 <input type="checkbox"/> W4	_____	<input type="checkbox"/>	<input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall	_____	\$ _____	
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Exams, Online Study Group and course materials are not returnable, and no refunds will be made. Prices subject to change without notice. Please allow 3-5 business days for processing all orders in addition to the delivery time. (Processing times may be longer during high-volume periods of the year.)

W1 = Jan 15-Mar 15 W3 = Jul 15-Sep 15
 W2 = Apr 15-Jun 15 W4 = Oct 15-Dec 15

Shipping/Handling Charges
 Add 7% of course materials total. Minimum shipping fee \$20. \$ _____

WI Residents Add 5% Sales Tax \$ _____

Payment Must Accompany Order

Make check payable to International Foundation of Employee Benefit Plans.

Check # _____ \$ _____

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Expedited and International Shipments—
 Contact the CEBS Department for more information.

Exam Transfer \$150 Course _____ to W _____ Yr _____ \$ _____

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Grand Total for Above \$ _____



CEBS Program
 International Foundation—Certification
 P.O. Box 689954
 Chicago, IL 60695-9954

Questions? Email
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 phone (800) 449-2327,
 option 3.

Special exam assistance?
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