



## FCIA Supervisor Certification of Work Experience Form

### FCIA Pathway 3-B

Per the [FCIA Application Guidelines](#), all FCIA membership applications must be accompanied by a certification of work experience. To be eligible, the person certifying your Canadian work experience must have been your direct or indirect supervisor and an FCIA in good standing who was actively working (not on a leave of absence) over the entire experience period being certified.

#### Requirements:

- A separate work certification form is required for each position held during the certification period, including for different positions at the same company.
- A separate work certification form is required for each period of work within the same position with a different supervisor.

#### Applications must include the following:

1. The specific start and end dates for each period of work being used for certification purposes.
2. Detailed descriptions of the specific actuarial work performed, highlighting the particular Canadian-specific work experience where applicable. Work descriptions should be precise without any room for interpretation and should provide ample detail. Statements such as “all tasks related to pension plan valuation” are not sufficient. **Copies of position profiles, job postings or job descriptions are not acceptable.**
3. Canadian work experience certified by an FCIA using the appropriate form(s) to attest to the accuracy of the description of the Canadian work and to certify that the experience is sufficient in their view to meet the requirement.

#### Important notes:

- Canadian residency and/or working for a Canadian company are not sufficient to demonstrate satisfaction of the Canadian experience requirement. The work must be relevant to Canada, demonstrating understanding of the Canadian business environment (e.g., accounting, tax), regulatory and legislative environment (e.g., regulator guidelines), and actuarial environment (CIA [Standards of Practice](#), [Rules of Professional Conduct](#)).
- If you did not have an FCIA as your direct supervisor, it is possible to use an FCIA who did not directly supervise your work, but that FCIA must be sufficiently familiar with your work. Clear and detailed justification must be provided as to why this alternate option is being used, including an explanation of how that FCIA is familiar with the work you performed during the period.
- The distinction between work in Canada and work in another country depends primarily on the ultimate purpose of the work. It does not depend on where you live or where you happen to be when doing the work. For full details, please consult the [Standards of Practice](#) (subsection 1160, Scope).

## Section 1: General Information

Applicant's full legal name: \_\_\_\_\_

Other fellow-level designation: \_\_\_\_\_

Recognized actuarial organization: \_\_\_\_\_

Date other fellow-level designation was obtained: \_\_\_\_\_

Employer name: \_\_\_\_\_

Job title: \_\_\_\_\_

Type of role: \_\_\_\_\_

Primary practice area: \_\_\_\_\_

What percentage of a full work week did the position occupy? \_\_\_\_\_%

## Section 2: Canadian-specific actuarial work experience

The start date of the Canadian actuarial work experience period must not be earlier than the more recent of a) 36 months prior to the date of the FCIA application, or b) the date that other fellow-level designation was obtained. An exception occurs if there was a qualified leave(s) of absence as per the [FCIA Application Guidelines](#) during the work experience period. If this is the case, then **Section 4** of this form must be filled out and the start date of the work experience period can be extended by the length of the leave(s), up to a maximum of two years.

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Percentage of work during this period that was Canadian-specific: \_\_\_\_\_ %

A: Length of actuarial work experience period, in days (End date – Start date) \_\_\_\_\_

B: Less total length of any qualified and unqualified leaves of absence during the period, in days<sup>1</sup>: \_\_\_\_\_

C: Total length of Canadian-specific actuarial work experience period, in days (A – B): \_\_\_\_\_

D: Reduction for less than full time work, in days (C x (100% - % from Section A): \_\_\_\_\_

E: Total Canadian-specific work experience period, in days (C – D): \_\_\_\_\_

F: Total eligible Canadian-specific work experience, in days (E x % of work that is Canadian-specific): \_\_\_\_\_

**Total months of eligible Canadian-specific actuarial work experience<sup>2</sup>:** \_\_\_\_\_

(Calculated by dividing the total number of eligible days by 30.42; 365days/12 months)

<sup>1</sup> Include the total number of days of any qualified leaves of absence from Section 4 that took place during the Canadian-specific work experience period, plus any elective leaves of absence taken during the period.

<sup>2</sup> Requirement is 12 months of Canadian-specific actuarial work experience as per the [2024 FCIA Application Guidelines](#). The requirement can be met using one, or multiple, forms.

### Section 3: Overall actuarial work experience

The start date of the overall actuarial work experience period must not be earlier than six (6) years prior to the date of the FCIA application. An exception occurs if there was a qualified leave(s) of absence as per the [FCIA Application Guidelines](#) during the work experience period. If this is the case, then Section 4 of this form must be filled out and the start date of the work experience period can be extended by the length of the leave(s), up to a maximum of two years.

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

#### **Calculation of eligible overall actuarial work experience**

- A: Length of actuarial work experience period, in days (End date – Start date) \_\_\_\_\_
- B: Total length of any qualified and unqualified leaves of absence during the period, in days<sup>3</sup>: \_\_\_\_\_
- C: Total length of overall actuarial work experience period, in days (A – B): \_\_\_\_\_
- D: Reduction for less than full time work, in days (C x (100% - % from Section A): \_\_\_\_\_
- E: Total eligible overall work experience, in days (C – D): \_\_\_\_\_

**Total months of eligible overall actuarial work experience<sup>4</sup>:** \_\_\_\_\_  
(Calculated by dividing the total number of eligible days by 30.42; 365days/12 months)

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<sup>3</sup> Include the total number of days of any qualified leaves of absence from Section 4 that took place during the overall work experience period, plus any elective leaves of absence taken during the period.

<sup>4</sup> Requirement is 36 months of overall actuarial work experience as per [2024 FCIA Application Guidelines](#). The requirement can be met using one, or multiple, forms.

#### Section 4: Qualified leave(s) of absence:

If you had any qualified leaves of absence during the work experience periods in Sections A and/or B, please provide details for each leave.

**Absence 1** Start date of absence: \_\_\_\_\_ End date of absence: \_\_\_\_\_

Reason for absence: \_\_\_\_\_ Length of absence (days): \_\_\_\_\_

If 'other', please explain: \_\_\_\_\_

**Absence 2** Start date of absence: \_\_\_\_\_ End date of absence: \_\_\_\_\_

Reason for absence: \_\_\_\_\_ Length of absence (days): \_\_\_\_\_

If 'other', please explain: \_\_\_\_\_

**Absence 3** Start date of absence: \_\_\_\_\_ End date of absence: \_\_\_\_\_

Reason for absence: \_\_\_\_\_ Length of absence (days): \_\_\_\_\_

If 'other', please explain: \_\_\_\_\_

**Total length of qualified absences during the total work experience period (days): \_\_\_\_\_**

## Section 5: Description of work experience

Provide a detailed description of your work experience during the time period indicated in Sections 2 and 3 of the form. Please note we do not accept company-provided job descriptions.

## Section 6: Supervisor information

To be completed by supervisor.

Type of supervisor:  Direct  Indirect

Supervisor full legal name: \_\_\_\_\_

Date FCIA designation was obtained: \_\_\_\_\_

(Supervisors MUST hold an FCIA designation to qualify any potential candidates.)

If indirect, please explain supervisor involvement as per the [FCIA Application Guidelines](#):

Email address: \_\_\_\_\_

I agree to be contacted, if necessary, to verify my certification of the candidate's work experience.

## Section 7: Canadian experience certification

***Direct supervisor (if indicated in Section 6)***

I certify that the description of Canadian-specific actuarial work experience performed by \_\_\_\_\_ under my supervision during the time specified is accurate. I also certify that this experience totals at least \_\_\_\_ months of full-time Canadian experience accrued in the last 36 months and accrued following the attainment of a fellow-level designation from a recognized actuarial association, as set forth by the qualification requirements of the Canadian Institute of Actuaries.

***Indirect supervisor (if indicated in Section 6)***

I certify that the description of Canadian-specific work experience performed by \_\_\_\_\_ is accurate. Although I was not their direct supervisor, I am sufficiently familiar with their work to certify that it meets the qualification requirements of the Canadian Institute of Actuaries. Specifically, that this experience totals at least \_\_\_\_ months of full-time Canadian experience accrued within the last 36 months and accrued following the attainment of a fellow-level designation from a recognized actuarial association, as set forth by the qualification requirements of the Canadian Institute of Actuaries.

***The form will be rejected if the total number of months exceeds 36 months. To make corrections, revise your dates in Section 2, as per the [2024 FCIA Application Guidelines](#).***

Supervisor signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Section 8: Applicant attestations

### To be completed by applicant.

- I confirm that I worked at the company indicated in Section 1 (General information) for the entire time indicated in both Sections 2 (Canadian-specific actuarial work experience) and 3 (Overall actuarial experience).
- I confirm that the description provided in Section 5 (Description of work experience) is for work done during the time period indicated in both Section 2 (Canadian-specific actuarial work experience) and 3 (Overall actuarial experience).
- I confirm that the supervisor named in Section 6 (Supervisor information) was my supervisor, as per the 2024 FCIA Application Guidelines, during the entire time indicated in both Sections 2 (Canadian-specific actuarial work experience) and 3 (Overall actuarial experience).
- I understand that incomplete and/or incorrectly completed certification(s) of work can cause my FCIA membership application to be delayed or rejected.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_