



SOCIETY OF ACTUARIES

APPLICATION FOR WAIVER OF SOCIETY OF ACTUARIES (SOA) EXAMINATIONS BASED ON CREDIT WITH THE CASUALTY ACTUARIAL SOCIETY (CAS)

To receive waiver of SOA examinations by means of credit obtained from the CAS, this application must be completed and returned to Brett Rogers, SOA Registrar at brogers@soa.org along with copies of pass lists or some other appropriate verification of credits obtained. The completed application will then be submitted to the SOA's Board of Directors for approval in March (if received before February 1), June (if received before May 1), or October (if received before September 1). Please refer to the [Waiver Rules for Casualty Actuarial Society Exams](#) on the SOA website for details on eligibility for waivers.

Associateship or Fellowship with the SOA is attained upon the completion of all education, examination, and further requirements as prescribed by the SOA's Board of Directors. Please see the SOA website for the current requirements for membership.

Name: _____
(last name) (first name) (middle name)

Address: _____

(city) (state) (zip or postal code) (country)

Date of Birth: _____ **E-Mail Address:** _____

Have you previously received credit for Society of Actuaries examinations? Yes No

Please list credits currently obtained.

<u>Exam</u>	<u>Date Passed/Waived</u>	<u>Basis for Credit</u>	
_____	_____	Exam	Waiver
_____	_____	Exam	Waiver
_____	_____	Exam	Waiver
_____	_____	Exam	Waiver
_____	_____	Exam	Waiver
_____	_____	Exam	Waiver
_____	_____	Exam	Waiver
_____	_____	Exam	Waiver

Signature: _____ **Date:** _____

Send application to SOA Registrar, Brett Rogers at brogers@soa.org.