

# Accurate Valid Test C11 Tips | C11 100% Free Study Reference

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## Nghiên cứu các hệ thống tích hợp với Core banking:

1. Bạn thường sử dụng các loại hệ thống tích hợp nào? Liệt kê và mô tả ngắn gọn về chúng.
2. Bạn muốn sử dụng hệ thống tích hợp nào nhất? Tại sao?
3. Theo thực trạng hiện nay, bạn quan ngại vấn đề nào của hệ thống ngân hàng? Tại sao?

## Trả lời

### Câu 1:

- Tích hợp core banking với NAPAS thông qua chuẩn ISO 8583 / API: Đây là lớp tích hợp cho phép kết nối trực tiếp giữa core banking và hệ thống chuyển mạch tài chính NAPAS. Luồng giao dịch thanh toán thẻ, chuyển khoản 24/7, QR và clearing được truyền và xác thực theo thời gian thực. Việc sử dụng ISO 8583 cho phép đảm bảo tính toàn vẹn message, cấu trúc data field chuẩn hóa và giảm sai lệch dữ liệu trong xử lý liên ngân hàng.

- Middleware/ESB phục vụ điều phối message đến NAPAS: Trong nhiều ngân hàng, lớp tích hợp ESB hoặc API Gateway đóng vai trò routing, transformation và load balancing nhằm giảm áp lực xử lý trực tiếp lên core banking và tránh tình trạng nghẽn giao dịch.

- Hệ thống reconciliation đối soát với NAPAS: Phục vụ đối chiếu file settlement, xử lý tra soát và bộ trữ giao dịch, đảm bảo dữ liệu khớp chính xác giữa số cái core và clearing report từ NAPAS. Điều này giúp ngân hàng hạn chế rủi ro kế toán và sai lệch số dư khách hàng.

### Câu 2:

- Tối ưu hóa hiệu năng xử lý giao dịch (transaction throughput & latency):

+ Luồng giao dịch kết nối trực tiếp giữa core banking và NAPAS giúp giảm độ trễ (latency) so với mô hình qua nhiều tầng middleware.

+ Message chuẩn ISO 8583 giúp giảm overhead data, tăng tốc độ truyền.

+ Khi kết hợp Gateway middleware, có thể thực hiện load balancing, queue management, giúp hệ thống duy trì throughput ổn định trong giờ cao điểm giao dịch 24/7.

- Chuẩn hóa giao thức tích hợp và nâng cao tính tương thích hệ thống

Trang 1

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## IIC Principles and Practice of Insurance Sample Questions (Q54-Q59):

### NEW QUESTION # 54

Original Insurance Company terminated its broker agreement with TOY Insurance Brokers. Which situation likely resulted in this termination?

- A. TOY Insurance Brokers did not keep premiums in a trust account and used them to pay expenses
- B. Original Insurance Company provided quotes on all broker applications
- C. Original Insurance Company did not set service standards
- D. TOY Insurance Brokers did not remit commissions owed to the insurer

### Answer: A

Explanation:

Brokers hold client premiums in trust accounts, separate from operating funds. This is a legal requirement under provincial insurance legislation. Trust funds belong to insurers (or insureds) until properly remitted. If TOY Insurance Brokers used trust funds to pay their own expenses, they violated both fiduciary duty and regulatory obligations. This constitutes serious professional misconduct and is one of the most common and serious reasons for immediate termination of a broker contract-often accompanied by regulatory investigation or license suspension.

Option A would not justify termination because service standards should be defined by the insurer, not the broker. Option B reflects good insurer practice and is unrelated to termination. Option C is incorrect because brokers do not remit commissions to insurers-insurers pay commissions to brokers.

Therefore, the only correct answer is D: failure to maintain premiums in a trust account.

### NEW QUESTION # 55

How do insurers try to balance premiums against the losses they might have?

- A. By having a good spread of risk
- B. Through insuring a small number of superior risks
- C. By writing as much business in one location as possible
- D. Through specializing in one or two kinds of risk

### Answer: A

Explanation:

Insurers must ensure they collect enough premium to cover potential losses while remaining competitive. One of the most important methods is maintaining a good spread of risk-diversifying exposures across different geographical areas, classes of business, and types of insureds. This spreads the impact of losses, reducing the chance that a single catastrophic event or concentration of similar risks will threaten the insurer's financial stability.

Option B, specialization, increases dependence on a narrow market segment and may elevate risk volatility.

Option C is unrealistic because insurers cannot rely solely on "superior risks," nor can they guarantee such a selection. Option D-concentrating business in one location-is dangerous because natural disasters, economic downturns, or localized events could cause severe aggregated losses.

Thus, insurers most effectively manage loss volatility through A: a good spread of risk.

### NEW QUESTION # 56

Huronial Insurance Company submitted incorporation documents and received approval to sell personal-lines property and automobile policies. Which document will the Office of the Superintendent of Financial Institutions (OSFI) issue?

- A. Insurer establishment document
- B. Order of commencement
- C. National insurance notice
- D. Insurer of record

### Answer: B

Explanation:

To operate as a federally regulated insurance company in Canada, an insurer must receive authorization from OSFI after meeting all incorporation and capital requirements. Once OSFI is satisfied that the insurer has complied with statutory conditions, it issues an

Order to Commerce and Carry On Business-commonly referred to as an order of commencement. This document grants the insurer the legal authority to start underwriting and selling insurance in Canada.

Option A is not an official document under Canadian insurance regulation. Option C does not exist in federal insurance legislation.

Option D is incorrect because the establishment of an insurer is handled through incorporation documents, not a post-approval "establishment" certificate.

Therefore, the correct OSFI authorization document is B: Order of commencement.

#### NEW QUESTION # 57

A retailer reports \$250,000 revenues and \$100,000 expenses, and projects \$50,000 in sustained growth next year. What is its net income for the past year?

- A. \$200,000
- B. \$300,000
- **C. \$150,000**
- D. \$250,000

**Answer: C**

Explanation:

Net income is calculated by subtracting expenses from revenues:

Net Income = Revenues / Expenses \text{Net Income} = \text{Revenues} - \text{Expenses} Net Income = Revenues / Expenses For this retailer:

$\$250,000 / \$100,000 = \$150,000$   $\$250,000 - \$100,000 = \$150,000$   $\$250,000 / \$100,000 = \$150,000$  The projection of \$50,000 sustained growth next year is irrelevant because the question asks specifically for last year's net income. Many insurance-based financial questions test the ability to isolate actual financial performance from future projections.

Options B, C, and D incorrectly combine revenue, expense, or growth figures.

Thus, the correct net income is A: \$150,000.

#### NEW QUESTION # 58

Which type of policy must be signed by a member of each participating insurer?

- A. Prescription
- **B. Subscription**
- C. All-inclusive
- D. Subrogation

**Answer: B**

Explanation:

A subscription policy is used when a single insurance risk is too large for one insurer to assume alone. Multiple insurers participate in the policy, each taking a percentage of the risk. Because each insurer is directly responsible for its portion, the policy must be signed by each participating insurer, acknowledging its share of liability.

Option A, prescription, refers to legal limitation periods.

Option B, all-inclusive, is not a recognized type of policy requiring multiple insurer signatures.

Option D, subrogation, is a legal right-not a policy type.

Only the subscription policy requires signatures from all insurers involved, making C correct.

#### NEW QUESTION # 59

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