



The Association of Certified Public Accountants International

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Application for Exemption from Examination

I hereby apply for exemption from:

<p><u>Formation 1</u> * *</p> <p>Business Mathematics & Quantitative Methods <input type="checkbox"/></p> <p>Economics & the Business Environment <input type="checkbox"/></p> <p>Legal Framework <input type="checkbox"/></p>	<p><u>Formation 2</u> * *</p> <p>Accounting Framework <input type="checkbox"/></p> <p>Taxation <input type="checkbox"/></p> <p>Information Technology for Managers <input type="checkbox"/></p> <p>Management Accounting <input type="checkbox"/></p>
<p><u>Professional 1</u> * *</p> <p>Financial Accounting <input type="checkbox"/></p> <p>Auditing <input type="checkbox"/></p> <p>Strategic Management Accounting <input type="checkbox"/></p> <p>Management and Strategy <input type="checkbox"/></p>	<p><u>Professional 2</u> * *</p> <p>Advanced Taxation <input type="checkbox"/></p> <p>Advanced Financial Accounting <input type="checkbox"/></p> <p>Audit Practice <input type="checkbox"/></p> <p>Financial Management <input type="checkbox"/></p>

* Please use a '✓' or 'X' to denote preference

Registration number: _____ Application for registration is attached

Surname: _____ Name: _____

Address: _____

E-mail: _____ Mobile: _____

Date:	Signature:
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Supporting documentation and at least two references, from reputable persons should be enclosed