



**The Association of
Certified Public Accountants
International**

16 Juniper Drive, Maidenhead, Berks,
SL68RE, England

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E-MAIL: cpa-ysu@btconnect.com

Agreed Registration						Initials	
Registration Qual.						Money Received	€ GBP
Exemptions						Qual.	
Initials						Nat.	
Exemption fees to pay			Paid			Exemp.	
						Branch	
						Date of Registration	

Form of application for admission as a Registered Student

Please use CAPITAL LETTERS throughout

1. Surname (Family name) (Mr/Mrs/Miss)					Tel:	Mob:	Work:
2. Other names					E-mail:		
3. Date of Birth	Day	Month	Year	Age	4. Nationality		
5. Address	Street			Town area		Town	
	No.	Province			Zip code	Country	

6. Education						
(a) Schools attended	From	To	Exams Passed	Subjects	Results/Grade	
(b) Further Education						
University / Polytechnic / College attended	Course		From	To	Degree / Diploma awarded	
(c) Professional Qualifications						
Name of Body	Exams Passed		Date	Grade of Membership		

7. If a previous application has been made, please state	
(i) Date of application	(ii) Reference number, if known

8. (a) Official Title of Applicant's present Business Position	Date commenced
<p>(b) If your application is successful your employer will be informed and sent a copy of the Association publication Employer's Guide to Training with the aim of assisting him in providing you with the necessary experience. Please state name of individual, organization and address to which notification should be sent.</p> <p style="margin-left: 40px;">Name</p> <p style="margin-left: 40px;">Organisation</p> <p style="margin-left: 40px;">Address</p> <p style="margin-left: 40px;">Nature of Employer's Business</p>	

9. I understand that in addition to passing the examinations, the applicant for admission to Associate membership of the Association must have had at least three years acceptable practical experience in Auditing and Accountancy. I propose to acquire this practical experience by:

- Following a training scheme organized by the above employer for registered students of the Association
- Obtain an appropriate range of work experience

Please delete appropriately

10. I propose to obtain tuition for the Association's examination at:

(name of College)

By means of full-time / part-time / sandwich / correspondence course and to present myself for examination first occasion in July / December *(year) * *Please delete appropriately*

11. To be signed by a member of the Association, or failing this, a responsible person such as a senior official in the applicant's place of employment:
It is essential that this section is completed

I hereby recommend
Whom I have known for years as a fit and proper person for admission as a registered student of the Association and as candidate for its examinations. To the best of my knowledge and belief, the information given in sections 10 to 11 of this form is correct in every particular.

Signature: Date:

Grade in the Association or,
Designation and Business
Address:

12. I enclose Bank Draft / Cheque / Wire transfer copy for £ / € in respect of registration fee (non-refundable) and annual subscription.

CASH MUST NOT BE SENT

13. I hereby make application for admission as a registered student on the basis of the particulars given in this form which, I certify to be correct. I have studied the STUDENT'S GUIDE and I undertake, if admitted, to comply with the regulations set out therein and to bear in mind the responsibilities which I would incur as a potential member of the Association

Signature Date