

RECOGNITION OF ACCOUNTANCY QUALIFICATION FOR PART III MODULE 1 APPLICATION FORM

Membership Number: _____

Title: (Mr, Mrs, Miss, Ms, Dr)

Last name(s):

First name(s):

Middle name(s):

Email address:

Telephone number:

please tick one:

Business

Home

Mobile

Please tick if you would like your primary email address and telephone number in our database updated with the above details.

If you have met the requirements to become a Certified Practising Accountant (CPA) as determined by CPA Australia, or a Chartered Accountant (CA) as determined by the Institute of Chartered Accountants (or overseas equivalents) you may apply and could become eligible for credit for Module 1. Please include with your application form:

- Documentary evidence of the qualification gained (e.g. certified copy of official transcript or certificate etc.); and
- contact details of an authorised person from the awarding institution for verification of the award.

Date of conferral of qualification:

Awarding Institution:

Contact for Verification

Please provide contact details of an authorised person from the awarding institution for verification of the award:

Title: (Mr, Mrs, Miss, Ms, Dr)

Last name(s):

First name(s):

Telephone number:

Email address:

Position Title:

Company:

Signature of Member _____ Date _____

Return to:

Actuaries Institute
Level 2, 50 Carrington Street,
Sydney, NSW, 2000.

t +61 (0) 2 9239 6100

f +61 (0) 2 9239 6170

e education@actuaries.asn.au

Privacy policy: Your privacy is important to us. The collection use and disclosure of personal information by the Actuaries Institute is covered in our Privacy Policy which is available at <http://actuaries.asn.au/utis/privacy-policy>