#

# FORM (01)

# APPLICATION FOR ASEAN CHARTERED PROFESSIONAL ACCOUNTANT

# (ASEAN CPA)

*(To be completed by Applicant in BLOCK LETTERS)*

Name of Accountant Applicant (As in Passport) : …………………………………………….

Name of Country of Origin : …………………………………………….

Academic Qualification Obtained : …………………………………………….

Qualification Place and date obtained : …………………………………………….

NAB Membership / Accountant Registration No1. : ………………………………………….…

(Country of Origin)

NAB Membership / Accountant Registration Date1 : …………………………………………….

ASEAN CHARTERED PROFESSIONAL ACCOUNTANTS Register (ACPAR):

Certified Compliance with ASEAN CPA Criteria:

|  |  |  |
| --- | --- | --- |
|  | possess an accountancy degree which has been accredited under prevailing education law and regulations or pass a professional accountancy examination program. Overseas degrees must be from an accountancy program which has been acknowledged with equivalence status by the relevant authority/-ies. 2 |  |
|  | Possess a current and valid Professional Certification from KICPAA or Recognized professional bodies |  |
|  | has at least three (3) years of relevant practical work experience cumulatively within a five (5) year period prior to application (see Annex IV). 3 |  |
|  | Fulfil CPD requirement from the KICPAA, ACAR or relevant professional association (see Annex IV). 3 |  |
|  | Does not have any record record of serious violation on technical, professional or ethical standards, either in Cambodia or elsewhere. 4 |  |

Signature :

Name :

Date :

*Page 1 of 2*

|  |  |
| --- | --- |
| **For Official Use Only** |  |
| ASEAN CPA MC: (Name of Country of Origin)  | Meeting Date:  |
| Result: ……………………………  | Approval Date:  |
| ASEAN CPA No: ........………………………  | Registration Fee:  |
| Secretary General:  | Cashier/proof of payment:  |

Note:

1. delete if not applicable
2. supply evidence in forms of official documents (or their legal copy) from relevant authority/institutions.
3. supply evidence in the standard form in the relevant annex or in other formats so long as they contain (1) the information required in the standard forms and (2) be sufficently attested by relevant third/independent party where applicable.
4. supply evidence in forms of official statement from relevant authority/institutions.

*Page 2 of 2*

#

# FORM (02)

# RELEVANT PRACTICAL EXPERIENCE FOR ASEAN CHARTERED PROFESSIONAL ACCOUNTANTS REGISTRATION

Name of Accountant Applicant (As in Passport) : …………………………………………..

Name Title (Mr., Mrs, Ms., Dr.):

Qualification Place and date obtained :

License / Registration / Membership No\*. :

(Country of Origin)

License / Registration / Membership Date\*:

Qualification:

Date of Birth (DD/MM/YY): …………../…………/

Mailing Address:

Postcode :

Country :

Present Company/Organisation Name:

Company/Organisation Address:

Postcode :

Country :

I wish to be registered on the ASEAN Chartered Professional Accountants Register (ACPAR) and apply as described below in accordance with the provision that requires acquisition of relevant practical experience of minimum three (3) years cumulatively within the last five (5) year period.

#

# FORM (03)

# RELEVANT PRACTICAL EXPERIENCE FOR ASEAN CHARTERED PROFESSIONAL ACCOUNTANTS REGISTRATION

**Relevant Professional Accountancy Work Experience Record**

|  |  |  |  |
| --- | --- | --- | --- |
| Start Date / End Date (Months) | Organisation(s) / Position / Designation | Responsibility / Scope of Work | Attestant’s Information (Note 1) |
| Signature | Relationship to Applicant | Tel / Email |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

*Page 1 of 2*

Note 1: The attestant above shall be, in principle, the representative of the organization which the applicant has worked for.

To ASEAN Chartered Professional Accountant Monitoring Committee,

I hereby declare that the above descriptions are true to the best of my knowledge.

Signature :

Name :

Date :

*Page 2 of 2*

#

# FORM (04)

# DECLARATION FOR THE APPLICATION ASASEAN CHARTERED PROFESSIONAL ACCOUNTANT (ASEAN CPA)

I hereby declare that:

YES NO

I am an Accountant and complied CPD requirements 🞎 🞎

I meet the entire requirement as stated in Article 4 of the

ASEAN Mutual Recognition Arrangement (MRA) 🞎 🞎

No disciplinary action have been taken against me 🞎 🞎

I am not a bankrupt 🞎 🞎

Others:

Yours Sincerely,

……… ……… ……… ……… ………......

Name :

Identity Card No. :

NAB Membership / Accountant Reg. No. :

Date :