

CPA AUSTRALIA DIVISIONAL POSTAL ADDRESS & CONTACT DETAILS

For further information, please call or write to your nearest office or visit CPA Online at www.cpaaustralia.com.au

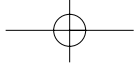
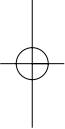
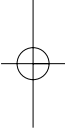
AUSTRALIA
Member Service Centre
CPA Australia
GPO 2820AA
Melbourne
Phone: 1300 73 73 73
Fax: 1300 78 76 73 (Australia only)
International Fax: +613 9606 9844

MALAYSIA
CPA Australia
26th Floor Menara Tun Razak
Jalan Raja Laut
Kuala Lumpur 50350
MALAYSIA
Phone 2698 8412
Phone LoCALL 1300 88 73 73
Facsimile 2698 8788
my@cpaaustralia.com.au

SINGAPORE
CPA Australia
51 Cuppage Road
#10-01 StarHub Centre
SINGAPORE 229469
Phone 6836 1233
Facsimile 6836 2722
sg@cpaaustralia.com.au

HONG KONG CHINA
CPA Australia
Rooms 1201-1206 Tai Yau Building
181 Johnston Road
Wanchai
HONG KONG
Phone 2891 3312
Facsimile 2832 9167
hk@cpaaustralia.com.au

BEIJING REPRESENTATIVE OFFICE
CPA Australia
Room F201A Ocean Plaza
No 158 Fu Xing Men Nei Street
Beijing 100031
People's Republic of China
Phone (8610) 6641 7799
Fax (8610) 6641 5919
beijing@cpaaustralia.com.au



CPA AUSTRALIA WEBSITE ADDRESS
www.cpaaustralia.com.au

Australian Members can contact their local office by calling 1300 73 73 73

CPA Australia ABN 64 008 392 452



Notes to consider when completing this form

- ## DETAILS

[illegible]

CHARACTER TESTIMONIALS

In accordance with CPA Australia's Constitution this application must be accompanied by two original testimonials as to character which must be dated not more than three months prior to the date of the application. One of the testimonials must be from a member of CPA Australia or of any other Institute, Society or Corporation of accountants recognised by CPA Australia.

For this purpose CPA Australia recognises the following bodies:

<i>American Institute of Certified Public Accountants</i>	<i>The Institute of Certified Public Accountants in Ireland</i>	<i>The Institute of Chartered Accountants of Scotland</i>
<i>The Association of Chartered Certified Accountants (UK)</i>	<i>The Institute of Certified Public Accountants of Singapore</i>	<i>The Institute of Chartered Accountants of Sri Lanka</i>
<i>The Canadian Institute of Chartered Accountants</i>	<i>The Institute of Chartered Accountants in Australia</i>	<i>The Malaysian Institute of Certified Public Accountants</i>
<i>The Chartered Institute of Management Accountants (UK)</i>	<i>The Institute of Chartered Accountants in England and Wales</i>	<i>The Malaysian Institute of Accountants</i>
<i>The Chartered Institute of Public Finance and Accountancy (UK)</i>	<i>The Institute of Chartered Accountants in Ireland</i>	<i>The South African Institute of Chartered Accountants</i>
<i>The Hong Kong Society of Accountants</i>	<i>Institute of Chartered Accountants of New Zealand</i>	

Where possible please arrange to have these testimonials completed on the form in the panels provided below, otherwise attach separate original copies. Originals will be returned if photocopies are provided.

1. CHARACTER TESTIMONIAL

Note: Testimonials are not to be completed by immediate family members.

From a member of CPA Australia or of any other Institute, Society or Corporation of accountants recognised by CPA Australia (refer above for list of recognised bodies).

I support the applicant in his/her application for CPA Australia Membership.

The applicant has been favourably known to me for years.

Title	<input type="text" value="Mr/Ms/Mrs/Miss/Other"/>	Family Name	<input type="text"/>		
First Name	<input type="text"/>	Middle Name	<input type="text"/>	Preferred Name	<input type="text"/>
Address	<input type="text"/>				
	<input type="text"/>			City	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Work Phone	<input type="text" value="()"/>		Home Phone	<input type="text" value="()"/>	
Member of (refer above)	<input type="text"/>		Membership Status	<input type="text"/>	
Signature	<input type="text"/>		Date	<input type="text"/>	Membership Number <input type="text"/>

*Testimonial must not be dated more than 3 months prior to the date of application.

2. ADDITIONAL CHARACTER TESTIMONIAL

Note: Testimonials are not to be completed by immediate family members.

I support the application in his/her application for CPA Australia Membership.

The applicant has been favourably known to me for years.

Title	<input type="text" value="Mr/Ms/Mrs/Miss/Other"/>	Family Name	<input type="text"/>		
First Name	<input type="text"/>	Middle Name	<input type="text"/>	Preferred Name	<input type="text"/>
Address	<input type="text"/>				
	<input type="text"/>			City	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Work Phone	<input type="text" value="()"/>		Home Phone	<input type="text" value="()"/>	
Signature	<input type="text"/>		Date	<input type="text"/>	

*Testimonial must not be dated more than 3 months prior to the date of application.

FEES AND CHARGES

PAYMENTS

All Cheques should be made payable to CPA Australia.

AMEX ☐ AUST.BANKCARD ☐ MASTERCARD ☐ VISA ☐ DINERS CLUB ☐ CHEQUE ☐

Cardholders Name	<input type="text"/>		
Card Number	<input type="text"/>		
Expiry date	<input type="text"/>	Amount Paid \$	<input type="text"/>
Cardholders Signature	<input type="text"/>	Date	<input type="text"/>

Office Use Only

Fees Paid	
ROC Number	<input type="text"/>
Amount Paid	<input type="text"/>
Date Paid	<input type="text"/>
Trans. No. (+ Batch ID.)	<input type="text"/>

OFFICE USE ONLY

University Code	<input type="text"/>	Title of Degree	<input type="text"/>	Mode of Study (Full-time/Part-time/External)	<input type="text"/>	Year of Completion	<input type="text"/>
University Code	<input type="text"/>	Title of Degree	<input type="text"/>	Mode of Study (Full-time/Part-time/External)	<input type="text"/>	Year of Completion	<input type="text"/>

PASSED			
Taxation Law	No <input type="checkbox"/>	Company Law	No <input type="checkbox"/>
Year <input type="text"/>		Year <input type="text"/>	
Audit	No <input type="checkbox"/>	Assessors ID	
Year <input type="text"/>			

ACCREDITED SEQUENCE Year: Finance ☐ IT ☐ Mgt Acc ☐ Local Govt ☐ Financial Planning ☐

Director's Certificate - I certify that the applicant meets the requirements for Admission.

Divisional Director	<input type="text"/>	Date	<input type="text"/>
Recommended by Committee	<input type="text"/>	Approved by Divisional Council	<input type="text"/>
Division Code	<input type="text"/>	Date Admitted	<input type="text"/>

TYPE OF COMMUNICATION

Please tick the topic areas you **DO NOT** wish to receive information on:

A. BY INDUSTRY/PROFESSIONAL INTEREST

Specialised Industry area	Please tick to opt out	Specialised Industry area	Please tick to opt out
Audit	<input type="checkbox"/>	Management Accounting	<input type="checkbox"/>
Ethics	<input type="checkbox"/>	Risk Management	<input type="checkbox"/>
External Reporting	<input type="checkbox"/>	Superannuation	<input type="checkbox"/>
Financial Planning	<input type="checkbox"/>	Small Business	<input type="checkbox"/>
Information Management & Technology	<input type="checkbox"/>	Taxation	<input type="checkbox"/>
Insolvency & Reconstruction	<input type="checkbox"/>	Treasury	<input type="checkbox"/>

B. SPECIALIST EMAIL NEWSLETTERS

Title	Please tick to opt out	Title	Please tick to opt out
CPA Online Weekly Update Newsletter (COW)	<input type="checkbox"/>	Academia/Education	<input type="checkbox"/>
ATP (Australian Tax Practice Publications)	<input type="checkbox"/>	Planning CoE Newsletter	<input type="checkbox"/>
CPA Solutions Email Newsletter – Latest offers	<input type="checkbox"/>	Strategic Business Management	<input type="checkbox"/>
CPA Tax News	<input type="checkbox"/>	Super Power (Superannuation CoE newsletter)	<input type="checkbox"/>
Industry & Commerce	<input type="checkbox"/>	Ethics & Corporate Governance CoE	<input type="checkbox"/>
Public Sector Accounting	<input type="checkbox"/>	Information Management & Technology	<input type="checkbox"/>

C. CPA SOLUTIONS PROGRAMS

Solutions provided to CPA Australia members by a range of business partners. Through these partnerships, members have access to great benefits, many exclusive to members, on a variety of products and services.

Partner	Please tick to opt out	Partner	Please tick to opt out
All CPA Solutions Material	<input type="checkbox"/>	Fairfax Business Media (BRW & other business publications) ...	<input type="checkbox"/>
AMEX (Credit Card & Business Card)	<input type="checkbox"/>	Optus (Telecommunications)	<input type="checkbox"/>
Norwich Union (Succession Planning, Corporate Super)	<input type="checkbox"/>	Australian Unity (Health Insurance)	<input type="checkbox"/>
King Insurance	<input type="checkbox"/>	Thomson Legal & Regulatory & other publications	<input type="checkbox"/>
Futurestep (Executive Recruitment & Careers)	<input type="checkbox"/>	CPA Solutions Telemarketing	<input type="checkbox"/>
Hertz (Vehicle rentals)	<input type="checkbox"/>		

Due to business processes for bulk mailing there may be a delay of up to three weeks, in exceptional circumstances, to fully implement your request.

ANNUAL REPORT OPTIONS

Which format would you prefer to receive the CPA Australia Annual Report?

Please tick

Concise Version	<input type="checkbox"/>	Electronic Version/Alert	<input type="checkbox"/>
Full Annual Report	<input type="checkbox"/>	No Annual Report	<input type="checkbox"/>

Note: If you do not choose an option you will continue to receive the full version of the annual report.

PREFERRED METHOD OF COMMUNICATION – PROFESSIONAL DEVELOPMENT

The distribution of PD information is carefully targeted based on your Member Profile. You may however choose your preferred method of communication.

Please tick if you prefer not to receive PD material via.

PD emails	<input type="checkbox"/>	PD faxes	<input type="checkbox"/>
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Due to business processes for bulk mailing there may be a delay of up to three weeks, in exceptional circumstances, to fully implement your request.

REMINDER TO UPDATE YOUR DETAILS

IMPORTANT

Please take the opportunity to regularly review your Communication Profile. By opting out of receiving information you may be missing valuable opportunities or information allowing you to stay one jump ahead.

Would you like to be reminded electronically to review these options twice a year?

No, please do not remind me

☐

DECLARATION

- (i) Have you ever been convicted in the past 10 years of an offence involving a criminal charge, or is there any charge pending? ☐ Yes ☐ No
- (ii) Are you or have you ever been a debtor in any Sequestration Order, Deed of Assignment, Composition, or Deed of Arrangement, under the provisions of the Bankruptcy Act? ☐ Yes ☐ No
- (iii) Are you or have you ever been a Director of a Company to which a Receiver, a Provisional Liquidator, a Liquidator, a Scheme Manager, or an Official Manager has been appointed while you were a Director, or within six months after you ceased to be a Director? ☐ Yes ☐ No
- (iv) Have you ever been refused membership of a statutory, professional or other body? ☐ Yes ☐ No
- (v) Have you ever been subject to disciplinary proceedings by a statutory, professional or other body in respect of your professional capacity? ☐ Yes ☐ No
- (vi) Have you previously been a member of CPA Australia? (This does not include the CPA Passport Program) ☐ Yes ☐ No

If you have answered "yes" to any of these questions, please provide full details on a separate sheet and enclose it in a sealed envelope attached to your application marked for the attention of the Divisional Director. Note: A positive answer to any of the above questions will not automatically result in rejection of the membership application. Each application will be considered on its merits.

I HEREBY DECLARE THAT:

- The information provided in this application is true and correct.
- If admitted as a member, I shall be bound by the Constitution of CPA Australia, the By-Laws, Code of Professional Conduct, Professional and Technical Standards and Pronouncements of the Board now in force or which may hereafter from time to time in force.*
- Under the requirements of PS 3, I make a commitment to undertake structured Continuing Professional Development each year. (Please refer to your Members' handbook)
- I will endeavour to attend a Member Orientation Workshop within twelve months of joining CPA Australia. I acknowledge that I cannot advance to CPA status until I have attended a Member Orientation Workshop.
- I am not offering any Public Accounting Services as defined by By-Law 701.
- I acknowledge that failure to advance to CPA status within 8 years of admission will result in forfeiture of my membership.
- I have read and consented to CPA Australia's use, collection and disclosure of the information supplied in this Application form.

Signature

Date

*The Constitution of CPA Australia, Code of Professional Conduct, Pronouncements and other documents which bind members may be inspected at any office of CPA Australia. They are part of the Members' Handbook which is issued to every member on admission.

STATEMENT OF COMPLIANCE

I understand that by applying to become an Associate Member of CPA Australia I agreed to be bound by CPA Australia's Constitution, Code of Professional Conduct, Professional and Technical Standards and Pronouncements. I hereby acknowledge that an Associate is not permitted to act as a principal in public practice (By-Law 701), or to hold himself/herself out as being a principal in public practice.

(Any applicant who is a Registered Tax Agent please contact the Member Services Department.)

I acknowledge that my attention has been drawn to the summary of these provisions as set out in the Members' handbook.

Signature

Date

Potential applicants who are engaged as principals in public practice should be aware that admission to membership may only be granted upon completion of the CPA Program and Public Practice Program as a non-member.

Associates cannot act as principals in public practice

Further information may be obtained by contacting the Member Services Department in your local office.

HANDBOOK OPTIONS

CPA Members' Handbook

All members have free access to the Members' Handbook via CPA Online. This version is updated on a monthly basis.

Members may also choose to purchase the following versions via the CPA Online Store:

- CD Rom (Updated twice yearly)
- 4 Volume Handbook. Updates can be purchased in subsequent years.

CHECKLIST

Applicants for Admission as an Associate Member are required to have successfully completed a recognised Degree with an approved Accounting major. A list of recognised degrees can be found on www.cpacareers.com.au

Graduates from other disciplines and graduates with overseas qualifications should enquire personally as to their individual admission requirements.

CHECKLIST

To enable us to process your application, please ensure that you have completed each item on this checklist. Your form will be returned to you if you have not supplied all information or documentation at the time of lodging your application. Your cooperation in this matter is appreciated.

- ☐ attached the ORIGINAL of your academic record or certified copy.
- ☐ ensured that the words "Degree Awarded" or "Course Completed" appear on your academic record. If not, we require a letter of completion from your tertiary institution, or a certified photocopy of your degree.
- ☐ if you have been granted exemptions/ credits/ advanced standing within your degree program, evidence of prior successful completion of the exempted subjects and a certified copy of the academic transcript must be enclosed with your application.
- ☐ if you are applying on the basis of a postgraduate qualification, your undergraduate transcripts and award granted must be enclosed with your application.
- ☐ completed the two Character Testimonials.
- ☐ answered all questions, signed and dated the Declaration.
- ☐ signed and dated the Statement of Compliance.
- ☐ enclosed payment for the correct fee.
- ☐ if you are applying to be admitted **between 1 January and 30 June**, you are required to pay **an application fee and one full year's subscription fee**.
- ☐ if you are applying to be admitted **between 1 July and 31 December**, you are required to pay **an application fee and half a year's subscription fee**.
- ☐ if you are a member of Hong Kong China, Singapore or Malaysia Division, please attach a CERTIFIED copy of your identity card.
- ☐ if applying on basis of overseas qualifications provide evidence of Australian permanent residency.
- ☐ Please include a Certified Copy of your change of name document if the name on your academic transcripts or other documents is not the same as that on your Application for Admission form.

PRIVACY STATEMENT

APPLICATION FOR ADMISSION AS AN ASSOCIATE

CPA Australia is committed to protecting the privacy and security of the Personal Information which it holds about you.

The Personal Information which you provide us with in this form will be used by CPA Australia to:

- Process your application for your membership subscription with CPA Australia;
- Record your membership details and profile information;
- Manage your membership of CPA Australia;
- Ensure your compliance as a member, with CPA Australia's Constitution and By-Laws;
- Conduct market research in order to identify and analyse the ongoing needs of CPA Australia members; and
- Provide you with access to and information about a range of current and future membership benefits.

CPA Australia may disclose the Personal Information which you provide us with in this Associate Application Form to;

- CPA Solutions business and Marketing partners so that they may contact you about their products and services. CPA Solutions business and Marketing partners are organisations that provide services to CPA members including but not limited to financial, information technology, tax, vehicle rental, telecommunication, travel and other services. For a full list of CPA Solutions business partners see the CPA Online website: www.cpaaustralia.com.au. If you do not want us to disclose your Personal Information to CPA Solutions business and Marketing partners, please let us know by ticking the box below.
- External service providers to whom we have contracted out functions, such as printers, mailing houses and IT companies, but only for the purposes of processing your application.
- Professional and regulatory bodies.
- Related bodies corporate.

Your Personal Information may be transferred or stored outside the country where the information was collected for the purposes stated above.

You have the right to access any Personal Information which CPA Australia holds about you, subject to exceptions in any applicable privacy legislation. You may also request the correction of information which is inaccurate. Access and/or correction requests can be made at your local CPA Australia office or via the CPA Online "Manage your Membership" Service at www.cpaaustralia.com.au

For more information on CPA Australia's Privacy Policy, visit our website at www.cpaaustralia.com.au

☐ I have read the above privacy statement & request that CPA Australia not disclose information collected on this form to its business partners.

MEMBER PROFILE

Please tick appropriate box to indicate your interest preference.

FIELD OF EMPLOYMENT - Select one only

The field of employment that best describes yours is:

Academia/Education

Contracting / Consultancy

Government Commonwealth/National

Government State/Territory

Government Local

Government Business Enterprise

Industry & Commerce

Not for Profit

Public Practice

Professional Services (including Financial Planning)

Between Jobs/Parenting

Retired

LEVEL OF JOB RESPONSIBILITY - Select one only

Chief Executive Officer/Managing Director

Chief Financial Officer or Equivalent

Financial Controller

General Manager

Team Leader/Section Manager

Manager

Employee

Public Practice - Sole Practitioner

Public Practice - Partner

Public Practice - Employee

Partner in Non-Accounting Practice

Self Employed/Owner of Business

Other (e.g. Law Firm)

PRIMARY JOB FUNCTION - Select one only

Accounts Payable/Receivable

Auditing - External

Business Adv. Services/Management Consulting

Cost Accounting

Company Secretarial

Corporate Governance

External Reporting

Financial Control

Financial Planning

General Management

Human Resources/Training

Information Management/Technology

Insolvency and Reconstruction

Internal Audit/Risk Management

Law

Management Accounting

Marketing/Sales

Superannuation

Taxation

Trade Finance

Treasury

Other

INDUSTRY SECTOR - Select one only

Advertising/Media/Marketing

Agriculture, Forestry and Fishing

Business Services

Construction

E-Business/E-Commerce

Education

Electricity, Gas & Water Supply

Film/TV/Radio Services

Finance & Banking

Financial Services

Government Administration & Defence

Health and Community Services

Hospitality Industry

Insurance

Libraries, Museums and the Arts

Manufacturing

Mining

Personal Services (excluding Financial Planning)

Printing, Publishing and Recorded Media

Oil/Petroleum

Property Services

Recruitment & Employment Services

Sports/Entertainment/Recreation

Telecommunications

Transport and Storage

Travel & Tourism

Wholesale and Retail Trade

STAFF NUMBERS IN ORGANISATION

1-5

6-10

11-20

21-50

51-100

101-200

201-300

301-500

501-1000

1001+

LICENCES / REGISTRATIONS

Registered Tax Agent

Registered Company Auditor

Registered Company Liquidator

Trustee in Bankruptcy

Licensed Securities Dealer

Licensed Investment Advisor

Authorised Representative

Auditor Superannuation Funds

Holder of ICAA Public Practice Certificate

Licensed Insurance Agent (Singapore)

COMPANY DIRECTORSHIPS

Our records show that you hold the following official positions under corporations law:

Company Director

Company Secretary

HIGHEST EDUCATION QUALIFICATION CURRENTLY ACHIEVED

Less than degree

Degree

Postgraduate Diploma

Master's Degree

Doctorate

MEMBERSHIP OF OTHER BODIES

Australian Associations

Australian Associations of Tax Management Accountants

Australian Computer Society

Australian Institute of Company Directors

Australian Institute of Management

Chartered Secretaries Australia

Financial Planning Association

Institute of Chartered Accountants, Australia

Institute of Internal Auditors Australia

National Institute of Accountants (NIA)

National Tax & Accountants Association

Securities Institute of Australia

Taxation Institute of Australia

Overseas Accounting Bodies

Assoc. Chartered Certified Accountants (ACCA)

Chartered Inst. of Manag. Account. (CIMA)

Hong Kong Society of Accountants

Hong Kong Securities Institute

Institute of CPAs of Singapore

Malaysian Institute of Accountants (PA)

Malaysian Institute of Accountants (RA)

PROFESSIONAL INTERESTS - Select up to 4

These are areas in which you may not currently have involvement but are of a personal, professional or educational interest.

Auditing - External

Advisory Services/Manag. Consulting

Company Secretarial

Corporate Governance

Cost Accounting

Ethics

E-Business/E-Commerce

External Reporting

Financial Control

Financial Planning

General Management

Human Resources/Training

Information Management/Technology

Internal Audit/Risk Management

Insolvency and Reconstruction

Law

Management Accounting

Marketing/Sales

Public Sector Issues

Securities/Funds Management

Small Business

Superannuation

Taxation

Treasury

LEISURE & SPORT INTERESTS

We are interested in obtaining your interest level re promotion of social and sporting interests. This information will be of assistance to CPA Australia to incorporate social or sporting events into major events programs. It will also assist in the evaluation of future CPA Solutions partnerships.

Please indicate if you are interested in receiving this information:

Leisure Activities

Dance

Gardening

Film/TV

Music

Shopping

Theatre

Travel

Wine & Food

Sporting Activities

Athletics/Swimming

Basketball/Netball

Cricket

Football/Rugby/Soccer

Fishing

Golf

Tennis