

Certification of Membership

For members of the following accounting bodies:

- ICAEW - SAICA - ICA Ireland - CAANZ
- ICAS - HKICPA - ICAZ

Re: _____
(Print applicant's name)

The person named above has applied for membership in Chartered Professional Accountants of British Columbia under the Reciprocal Membership Agreement between Chartered Professional Accountants of Canada and

(GAA member body)

Please confirm the following information:

Full legal name: _____

Date admitted to membership _____
(mm/dd/yyyy)

Academic Qualifications _____ Name of university _____

This membership was gained by:

- completing prescribed practical experience of _____ years
- virtue of passing the qualifying examination(s) on _____
(mm/dd/yyyy)

CONFIRMATION

_____ is a member in good standing with the _____
(GAA member body)

We know of no reason why membership in Chartered Professional Accountants of British Columbia should not be granted.

If such information cannot be given, please explain why:

Name and position

Signature

Date (mm/dd/yyyy)

Accounting body must return the completed document directly to cpabapplications@bccpa.ca