

The Institute of Chartered Accountants
of Newfoundland
95 Bonaventure Ave., Suite 501
St. John's NL A1B 2X5

Attn: Dorothy Keating, CA
Secretary-Treasurer

I wish to apply for admission to The Institute of Chartered Accountants of Newfoundland and Labrador. I am a member in good standing with the Institute of Chartered Accountants of _____, and joined by virtue of _____ completing the examination and experience requirements of the Institute or _____ by affiliation with _____ (name of relevant accounting body).

1. Year of successful completion of the Uniform Final Examination or Uniform Evaluation. _____
2. Date of completion of Practical Experience Requirements: _____
 - a. # of months of experience _____
 - b. minimum # of hours _____, including
 - i. minimum # of audit hours _____
 - ii. minimum # of taxation hours _____
3. Are you subject to any outstanding actions or orders by the disciplinary committee of your Institute? _____
4. Is your professional conduct under investigation by your current Institute? _____

In making this application I hereby agree with the Institute and each of its members to the terms of the by-laws, rules, regulations and procedures of the Institute and all acts or things done thereunder. I am of good moral character and know of no reason why membership in the Institute should not be granted.

A reference by two Chartered Accountants in good standing with The Institute of Chartered Accountants of Newfoundland and Labrador is attached.

I declare that the contents of this application are true and correct.

Name (please print)

Signature

Date



Admission to Membership

Two References Required

Referee's Recommendation 1

Re: _____
Print Member Applicant's Name

- I am a Chartered Accountant with membership in good standing in the province of Newfoundland and Labrador;
- I have known the applicant, who is not related to me, for _____ years;
- I attest that (check boxes)
 - I have found this applicant to be of good moral character and integrity; and
 - I know of no reason why membership in the Institute should not be granted.

Please add any comments you believe will help in evaluating this application.

Full name of referee (please print)

CICA Member No.

Signature

Date



Admission to Membership

Two References Required

Referee's Recommendation 2

Re: _____
Print Member Applicant's Name

- I am a Chartered Accountant with membership in good standing in the province of Newfoundland and Labrador;
- I have known the applicant, who is not related to me, for _____ years;
- I attest that (check boxes)
 - I have found this applicant to be of good moral character and integrity; and
 - I know of no reason why membership in the Institute should not be granted.

Please add any comments you believe will help in evaluating this application.

Full name of referee (please print)

CICA Member No.

Signature

Date