



**THE MALAYSIAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS  
(INSTITUT AKAUNTAN AWAM BERTAULIAH MALAYSIA)**

**APPLICATION FOR PRACTISING CERTIFICATE**

1. NAME \_\_\_\_\_
2. MEM. NO \_\_\_\_\_ DATE OF ADMISSION \_\_\_\_\_
3. OTHER PROFESSIONAL BODIES \_\_\_\_\_
4. NUMBER OF YEARS SPENT IN FIRM/FIRMS OF PUBLIC ACCOUNTANTS OR OTHER ORGANISATIONS BEFORE MEMBERSHIP WITH THE INSTITUTE:
 

Name of firm/firms _____	From _____	to _____	
(Enclose letter/s of confirmation from firm/s) _____	From _____	to _____	
_____	From _____	to _____	
_____	From _____	to _____	
5. NUMBER OF YEARS SPENT IN MALAYSIA UNDER THE SUPERVISION OF CPA MEMBER(S) IN PRACTICE AFTER MEMBERSHIP WITH THE INSTITUTE:
 

Name of firm/firms _____	From _____	to _____	
(Enclosed letter/s of confirmation from firm/s) _____	From _____	to _____	
_____	From _____	to _____	
_____	From _____	to _____	
6. NAME AND ADDRESS OF PRACTICE (UPON BEING GRANTED THE PRACTISING CERTIFICATE) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
7. DATE COMMENCE PRACTICE \_\_\_\_\_  
 (Applicant is required to submit a copy of the Form 5 lodge with the Companies Commission of Malaysia, if applicable.)
8. ARE ALL YOUR PARTNERS MEMBERS OF THE INSTITUTE? YES/NO/NOT APPLICABLE

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND I ENCLOSE HERewith THE FEE OF RM550.00 (SUBJECT TO 0% GST) FOR THE PRACTISING CERTIFICATE, WHICH IS RENEWABLE ANNUALLY ON JANUARY 1.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Member