



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

APPLICATION FOR PRACTISING CERTIFICATE

1. NAME _____
 TEL _____ EMAIL _____
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 _____
6. NAME AND ADDRESS OF PRACTICE (UPON BEING GRANTED THE PRACTISING CERTIFICATE) _____

7. POSITION HELD _____
8. DATE COMMENCE PRACTICE _____
 (Applicant is required to submit a copy of the Form 5 lodge with the Companies Commission of Malaysia / copy of the tax agent license approval letter issued under Section 153 of the Income Tax Act 1967 and MIA Practising Certificate, if applicable.)
9. 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 FOR THE PRACTISING CERTIFICATE, WHICH IS RENEWABLE ANNUALLY ON JANUARY 1.

Date _____

Signature of Member