(Reg. 7 Accountants (Application for Membership) Regulations





THE ACCOUNTANTS (APPLICATION FOR MEMBERSHIP) Regulations, 2016

APPLICATION FOR A LICENCE

TO: The Council of the Cayman Islands Institute of Professional Accountants.

I hereby apply for a licence to engage in public practice.

Instructions:

The application form should be completed electronically or in block letters and signed by the applicant as indicated (digital signatures accepted).

Note that where an applicant for the purpose of procuring a licence, makes any statement which to their knowledge is false in any material particular or has made any other misleading or fraudulent representation the Council shall be entitled to draw conclusions averse to the fitness and propriety of the applicant and the applicant will also be subject to investigation and possibly disciplinary action.

Note that competence and capability and accessibility and commitment requirements apply.

See Helpsheet: Applying for a Licence before completing this application.

If you are unsure whether you meet the requirements, please contact the office before submitting your application.

Licence applications will not be processed without accompanying fee.

MEMBERSHIP INFORMATION

CIIPA Membership	Date admitted as a	
Number	member of CIIPA	

INFORMATION			
Applicant's name:			
, [
,			
Last F	irst	Middle	
Date of Birth:		Nationality:	
		,	
PERSONAL			
Primary Address	Email address		
	Telephone Number		
	Mobile/Cell Number		
Secondary Address	Other Address		
Secondary Address	Other Address		
EMPLOYER			
Name and Address	Email address		
	Telephone Number		
FIRMS			
List all Firms for which the licence will be used for			
attestation			
PROFESSIONAL STATUS			
OVERSEAS PROFESSIONAL ACCOUNTING INSTITUT	E ("OPAI")		
OPAI Member number or ID			
Date first became a member of OPAI			
Professional Designation(s)			
Current Job Title			
Number of years of audit experience			
Number of years of experience other than audit			

LEGAL STATUS IN CAYMAN ISLANDS

	P. C.	
Solo	ect one	
	ymanian	
	rmanent Resident	
-	ork Permit Holder	
-		
Otr	her permission under Immigration Law	
	AND PROPER following are prescribed to be submitted 1, additional documents may be required at the disc	retion of
Cou		retion of
	Honesty, Integrity and Good Repute	
A. C	One written reference from a Partner or Director at your current or previous firm	
РТ	wo written references from professionals not associated with your current firm	
D. 1	wo written references from professionals <u>not</u> associated with your current firm	
C. I	Evidence of no criminal record	
i. A	Either written reference from all the firms where the professional competences of IES8 were acquired	
lice	esting to that experience and your role and competence, (see Helpsheet: Providing a reference for a ence application), or	
	Complete and submit Form 5A Evidence that you have completed at least 20 hours of Continuing Professional Development in the last	
yea	ar, and at least 120 hours in the previous 3 years, as at the date of the application, at least 60 of which list be verifiable. (Providing evidence that you have complied with the IES 7)	
F. <i>F</i>	An up-to-date resume covering the period during which you gained experience relevant to the	
арр	plication.	
	reby confirm that:	
1.	The information provided in this form and throughout this application is true, complete and accurate to the best of my knowledge;	Tick
2.	I will comply with the requirements of the IFAC Code of Ethics (<u>www.ifac.org/ethics</u>);	
3.	I have complied in full with the requirements of IES7: Continuing Professional Development, and have	
	completed at least 20 hours of CPD in the last year, and at least 120 hours in the previous 3 years 60 of which is verifiable and can make copies of all records in support available to Council or relevant	
4	Sub-Committee for inspection in the Cayman Islands within a reasonable time;	
4.	I have complied in full with the requirements of IES8: Professional Competence Requirements for Engagement Partners Responsible for Audits of Financial Statements and will maintain competence in the areas relevant to my practice;	
5.	I agree to participate in the CIIPA's Quality Assurance process and co-operate as required with my Firm's Quality Partner, CIIPA and the reviewers to facilitate this process.	

¹ Your name must appear in a consistent format throughout the application. If your certificates or other documents were issued in your maiden name, you should provide a copy of your marriage certificate.

Licenced Practitioner Application

6.	I am resident in the Cayman Islands meaning that I have made the Cayman Islands my primary place of residence, personal and professional life. See the CIIPA Helpsheet: Applying for a Licence.							
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7.	I have no objection to CIIPA contacting my Overseas Professional Accounting Institute, at any time during my membership, to confirm that I am in good standing or any other information relevant to my licence;							
8.	•	ction to CIIPA confirming the upon receipt of a written	•	nembership and licence with CIIPA parties;				
9.	I have never be	een excluded from membe	rship of a professional bo	ody on disciplinary grounds;				
10.	. I have never been subject to a disciplinary order by any professional body;							
11.	I have never be	· ·	on to act as an auditor or	director by CIMA or any equivalent				
12.	I have never be	een declared bankrupt in a	ny jurisdiction;					
13.	3. I have never been convicted of a criminal offence in any jurisdiction;							
14.	4. I am aware that certain information I have provided will be maintained on an electronic database for the purposes of administering CIIPA's membership activities and that this data will reside on the server of a third party service provider, which may be located outside the Cayman Islands; and							
15.	-		•	ovided in this form occurring after for as long as I am registered and				
In the	-	exception(s) to the decla ouncil will, at its sole dis	•	ls of the exception in a cover let hether the exception should pre				
Dat	e		Signature					