

Instructions for the Governmental Accounting Experience Verification Form

\Box This form is to be completed by the individual who supervised your work and must be one of the following:
* CPA from U.S. * CPA or CA from Australia * CA from Canada, Ireland and/or New Zealand * Contadores Publicos Certificado (CPC) from Mexico * CPA from Hong Kong Note: By administrative rule: (e) For purposes of (c) and (d) above, no experience shall be counted being under the direction of a licensed CPA, CA, CPC or other equivalent foreign designation holder unless such licensee has the authority to review, direct and evaluate on a continuing basis the accounting activities of those who are under the licensee's professional accounting control.
☐ The verifying CPA must have been active during the the entire period of employment being attested on the form. Experience gained under an inactive/expired CPA should not be listed on this form.
☐ Forward this form to the supervising CPA for completion.
☐ Upon receipt, upload this form into your online application.

	Governmental Accounting Experi	ience Verification Form
Applicant Name:		
Dates of Employment: From:	To:	Full Time
CPA OR CHARTERED ACCOUNTANT	VERIFYING INFORMATION- Specific t	ype of licensure held:
Certified Public Acount Chartered Account Chartered Account Certified Public Aco	ant (Canada)	ublic Accountant (Australia) Accountant (Australia) 5 Publicos Certificado (Mexico) Accountant (New Zealand)
Government Employer:		
Position Held in Agency: State, Country or Province where lice	ensed held:	Expiration Date:
The remainder of this form requests Requirement RSA 309-B:5, X. Please	-	liance with the Governmental Experience below.
	mercial or industrial business in acco	of non-governmental entities in three (3) or or ordance with generally accepted auditing
distinct organizational ur	nits in accordance with generally acc	of three (3) or more governmental agencies or septed auditing standards under the direction of a the Congress or to a state legislature.
operations of non-gover business under the direct	nmental entities engaged in three (3 tion of a licensee to determine the re ly accepted accounting principles ar	material covering the financial condition and) or more distinct lines of commercial or industrial eliability and fairness of the financial reporting and applicable government regulations for protection
If you checked A or C you must list t list the three or more governmental		mmercial or industrial businesses or if you check B you mus 19-B: 5, X.
Were the hours actual or approxima	te?	
# of hours auditing tax returns or bo	oks and accounts on non-governme	ental entities
# of hours auditing the books and ac agencies or distinct organizational u		
# of hours reviewing the financial sta condition and operations of non-go lines of commercial or industrial bus	vernmental entities engaged in thre	e(3) or more distinct
# of hours (administrative non-billab	ole, CPE, vacation, etc.)	
The information contained in the	reference is true and correct to the	e best of my knowledge and belief.
Printed Name	Signature	Date