



## Instructions for the Public Accounting Experience Verification Form

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- 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 this form. Experience gained under an inactive/expired CPA should not be listed on this form.
- Only experience which meets the board's experience requirement should be listed on this form. Each year of employment attested on this form must have 1500 hours in accounting, auditing and/or tax skills in order to qualify.
- Forward this form to the supervising CPA for completion.
- Upon receipt, upload this form into your online application.

**Public Accounting Experience Verification Form**

Applicant Name: \_\_\_\_\_

Experience Type:         Public Accounting     Industry         Private Practice

Dates of Employment:                      From: \_\_\_\_\_ To: \_\_\_\_\_

Candidate Worked:                      Full Time                       Part Time

**CPA OR CHARTERED ACCOUNTANT VERIFYING INFORMATION:**

- |  |   |
|--|---|
| <input type="checkbox"/> Certified Public Accountant (US)        | <input type="checkbox"/> Certified Public Accountant (Australia)  |
| <input type="checkbox"/> Chartered Accountant (Canada)           | <input type="checkbox"/> Chartered Accountant (Australia)         |
| <input type="checkbox"/> Chartered Accountant (Ireland)          | <input type="checkbox"/> Contadores Publicos Certificado (Mexico) |
| <input type="checkbox"/> Certified Public Accountant (Hong Kong) | <input type="checkbox"/> Chartered Accountant (New Zealand)       |

Supervisor License State/Province/Country: \_\_\_\_\_

License Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

# of Hours in Audit, Review, Financial Statement or any Report Function	
# of Hours in Management Advisory Services	
# of Hours in Financial Advisory Services	
# of Hours in Consulting Services	
# of Hours in Preparation of Tax Returns	
# of Hours in Furnishing Advice on Tax Returns	
# of Hours in Furnishing Advice on Tax Matters	
<b>Total Number of Hours Above</b>	
Other Hours (Administrative, CPE, Vocation, Etc.)	

I make the above statements with full knowledge that the person referred to is making application for licensure to the State of New Hampshire as a Certified Public Accountant.

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_ Written Signature \_\_\_\_\_