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Certificate of Enrollment

If you have not yet met the education requirements for this state, but are currently enrolled in an academic program at a U.S. college or university, you may still qualify to sit for the Uniform CPA Examination. All required courses and degrees must be completed no later than 120 days following the date you sit for your first section of the examination. In conjunction with your application for the Uniform CPA Examination, this form must be submitted directly to CPA Examination Services from the academic institution (along with an official transcript). CPA Examination Services must receive a final official transcript documenting successful completion of the education listed below. Although you may be permitted to submit a new application to retake failed sections or to sit for new sections before your final official transcript has been received, if you pass the examination, your Successful Candidate letter will not be released until your transcript has been received.

Part 1 - To be completed by the candidate:

(After completing Part 1, submit this form	to the registrar of the ac	cademic institu	ution where yo	our degree is being pursu	ed.):		
1. Applicant's Name:							
First		M.	. I.		Last		
2. Date of Birth:		3. Jurisdiction ID:Available from your user account at CPA					
					Central after your application has been submitted.		
4. I understand that I must complete meet this deadline will result in my so official transcript documenting succes	ores (including condit	tional credit)	being voide	d. I further understand			
Date	Applicant's	ant's Signature					
5. Name of academic institutio	n:						
3. Name of academic institutio							
Part 2- To be completed and n 1. Courses in which the candida			e academi	ic institution:			
Course Name				Course Number	Number of Credit Hours	Anticipated Completion Date mm/dd/yyyy	
2. Degree to be conferred:							
	Type (BS, BA, MBA,	etc)	Major		Expected Gradua	tion Date	
		Signature of Dean or Registrar Ti			Title		
Seal of Institution							
		RI	ETURN THI	IS FORM TO: CP.	A Examination S	ervices – IA	

THIS FORM TO: CPA Examination Services – IA P.O. Box 198469

Nashville, TN 37219-8469