

Instruction Sheet for Certificate of Experience

- If the space provided for your job description is not large enough, you may attach an additional sheet or sheets. The supervisor is REQUIRED to sign each additional sheet containing your job description.
- Only submit work experience which qualifies you for licensure: One year, minimum of 2,000 hours completed not more than one year preceding the date of application. You do not need to provide experience gained more than one year ago.
- On the second page of the Certificate of Experience form, the supervisor should only mark ONE of the four boxes, not all four.
- If you are reciprocal applicant and do not have recent experience (within the last one year) completed under the supervision of a licensed CPA, in lieu of this Certificate of Experience form, you will need to submit a resume detailing your accounting experience.
- O Upon completion, upload this form into your online application.

** We advise that you thoroughly read the experience requirements in Rule 20-3-.08 on the Georgia Board of Accountancy's website: http://rules.sos.state.ga.us/docs/20/3/08.pdf.



Certificate of Experience

	First	Middle		Last	
	Address	City		State	Zip Code
Employer:					
	Address				
	City	State	Zip Code	Telepho	ne
[;] irm Regist	tration Number:	(Re	quired for PUBLIC accoun	ting experience gained in Ge	eorgia)
osition of	Applicant:				
lame of Su	upervisor:				
Exact Dates (of Employment:	From:	_To:	(Cannot use "Prese	ent")
Total Hours	Worked for the period sta	ated above:	Total Number of Mor	ths Worked	
Full, detaile		nd of work performed for each p			
Full, detaile needed, sup Absences fro provided to	ed job description of the kir pervisor must sign EACH a com work (other than routi	nd of work performed for each p dditional page. ine illness and annual leave). For table break.	osition, along with the	dates and duties for each	position. If more space is
Full, detaile needed, sup Absences fro provided to	ed job description of the kin pervisor must sign EACH a om work (other than routi	nd of work performed for each p dditional page. ine illness and annual leave). For table break.	osition, along with the	dates and duties for each	position. If more space is
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Full, detaile needed, sup Absences fro provided to From	ed job description of the kin pervisor must sign EACH a rom work (other than routi support that it is an accep To	nd of work performed for each p dditional page. ine illness and annual leave). For table break.	osition, along with the	dates and duties for each	position. If more space is

Public Accounting Experience

Signature of Sup	pervisor
B. Qualifying experience of a candidate for certification must be meaningful with respect to qualifying the candidate for the practice of public accounting. The experience may consist of any type of services or advice using accounting, attest, compilation, management advisory, financial advisory, tax or consulting skills.	YES NO
A. Effective for applications received after June 30, 2009. One year of continuous experience immediately preceding the date of application for the certificate or within a reasonable time prior to the date of such application as provided herein by rule.	YES NO
In your opinion, did the applicant obtain sufficient experience to demonstrate satisfactory knowledge of current practice stand pronouncements of the profession for each of the following elements of experience?	Jards and

Industry/Business Experience	Supervisor Certificate/License Number					
In your opinion, did the applicant obtain sufficient experience to demonstrate satisfactory knowledge of current practice standards and pronouncements of the profession for each of the following elements of experience?						
A. Effective for applications received after June 30, 2009. One year of continuous experience date of application for the certificate or within a reasonable time prior to the date of such a by rule.						
B. Qualifying experience of a candidate for certification must be meaningful with respect to c practice of accountancy in industry or business the candidate must (a) have been employed by performance of duties primarily involving the use of financial accounting and auditing skills, w may have performed duties involving 1) the installation of internal control systems, or 2) the financial advisory, or consulting skills; or compliance with accounting aspects of tax or regulate	y a person or entity in the YES NO which follow GAAP. The candidate use of management advisory,					

	Signature of Supervisor			
- Government Experience	Supervisor Certificate/License Number			
In your opinion, did the applicant obtain sufficient experience to demonstrate satisfactory knowledge of current practice standards and pronouncements of the profession for each of the following elements of experience?				
A. Effective for applications received after June 30, 2009. One year of continuous experied date of application for the certificate or within a reasonable time prior to the date of such by rule.				
B. Candidate must have been employed by a federal, state or local government agency wh and whose employees are considered public employees and which is recognized by the Bos and organizational structure for performing auditing and accounting functions.				

	Signature of Supervisor		
Teaching Experience	Supervisor Certificate/License Number		
In your opinion, did the applicant obtain sufficient experience to demonstrate satisfactory pronouncements of the profession for each of the following elements of experience?	knowledge of current practice standards and		
A. Effective for applications received after June 30, 2009. One year of continuous exper date of application for the certificate or within a reasonable time prior to the date of suc by rule.			
B. Qualifing teaching experience for a candidate shall consist of teaching in the accounting credit at an accredited four year college/university. The teaching must include at least two accounting above the introductory or elementary level. One year of experience shall consequivalent in quarter hours, taught in a period consisting of not less than 12 months and not set.	o different courses of YES NO sist of no less than 24 semester hours, or the		

Signature of Supervisor

Supervisor Certificate/License Number