

Massachusetts

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 apply to sit for the Uniform CPA Examination (Exam). In conjunction with your application for the Exam, this form must be submitted directly to CPA Examination Services from your academic institution (along with an official transcript). All required courses and degrees must be completed within 90 days of the date you sit for any section of the examination. Once all required courses and degrees are completed, an official transcript will need to be sent directly to CPA Examination Services to remove the eligibility hold in order to continue sitting for more sections. This form is only valid for the Exam education requirements and cannot be used for the licensure education requirements.

1. Applicant's Name: _____

First

M. I.

Last

2. Date of Birth: _____

mm/dd/yyyy

3. Jurisdiction ID: _____

Available from your user account at CPA Central after your application has been submitted.

4. Courses in which you are currently enrolled:

| Course Name | Course Number | Number of Credit Hours | Anticipated Completion Date mm/dd/yyyy |
|-------------|---------------|------------------------|---|
| | | | |
| | | | |
| | | | |
| | | | |

5. Degree to be conferred:

Type (BS, BA, MBA, etc)

Major

Expected Graduation Date

Name of academic institution

Signature of Authorized Official of the Institution

I understand that I must complete my education within 90 days of sitting for any section of the examination. Failure to meet this deadline will result in my scores (including conditional credit) being voided. I further understand that I will be required to submit a final official transcript documenting successful completion of the courses and/or degree listed below within 90 days following the date I sit for the examination and that I will not be permitted to submit a new application to retake failed sections or to sit for new sections until my final official transcript has been received.

Date

Applicant's Signature

State of _____ County of _____

On this _____ day of _____, 20 _____. Before me personally appears _____ well known to me to be the person making this application and who, after being duly sworn, deposes and says the statements made therein are true and correct, to the best of his/her knowledge and belief.

My Commission expires: _____ Notary Public _____

RETURN THIS FORM TO:

CPA Examination Services - MA
P.O. Box 198469
Nashville, TN 37219-8469

Notary Seal