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). CPA Examination Services must receive a final official transcript documenting successful completion of the education listed below no later than 90 days immediately following the date you sit for your first section of the Exam. You will not be permitted to submit a new application to retake failed sections or to sit for new sections until your final official transcript has been received. 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:		3. Jurisdiction I	D:			
mm/	Available from yo	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 Gradua	ntion Date	
Name of academic institution		Signature	of Authorized Official of t	he Institution		
I understand that I must complete my (including conditional credit) being vo courses and/or degree listed below no retake failed sections or to sit for new	ided. I further understand to later than 90 days following	that I will be required to sub ng the date I sit for the exam	omit a final official transcr nination and that I will not	ipt documenting succe	ssful completion of the	
Date	 Applicant	oplicant's Signature				
State of		County of				
On this day of positively identified to me t deposes and says the statem	o be the person m	aking this CPA Exam	nination application	and who, after		
My Commission expires:		Notary Public				
RETURN THIS FORM TO:	CPA Examination P.O. Box 19846 Nashville, TN 3			Notary .	Seal	