

IQEX

Institute of Chartered Accountants in Australia (ICAA)

INITIAL APPLICATION

EXAMINATION DATE: 2011

Complete this application on-line prior to printing.

Read the "Candidate Bulletin" before completing this form. Score notices will be reported to the residential address. Incomplete applications may be deemed ineligible and cause candidates to miss the application deadline. This is the initial application for IQEX. If you have previously taken this examination, it is not necessary to file a paper application. Please contact our office for re-examination registration at 866-MY-NASBA or (615) 312-3781.

1. NAME - *must match your photo ID exactly*

Title (check one) Mr. Ms. Mrs. Miss

<input type="text"/> FIRST	<input type="text"/> MIDDLE	<input type="text"/> LAST
<input type="text"/> MAIDEN or PREVIOUS NAME(S)	<input type="text"/> SUFFIX	<input type="text"/> MOTHER'S MAIDEN NAME

2. RESIDENTIAL ADDRESS: This should be the address and telephone number at which you can be reached until the examination scores are reported. Any change in address must be submitted in writing to NASBA.

<input type="text"/>			
<input type="text"/>			
<input type="text"/> CITY	<input type="text"/> ST/PROV	<input type="text"/> ZIP/POSTAL CODE	<input type="text"/> COUNTRY
<input type="text"/> E-MAIL ADDRESS		<input type="text"/> TELEPHONE	

Your Notice to Schedule will be sent via e-mail. If no e-mail address is provided, your Notice to Schedule will be sent to the residential address.

4. BUSINESS ADDRESS:

<input type="text"/>			
<input type="text"/>			
<input type="text"/> CITY	<input type="text"/> ST/PROV	<input type="text"/> ZIP/POSTAL CODE	<input type="text"/> COUNTRY
<input type="text"/> TELEPHONE NUMBER			

5. DATE OF BIRTH:
Month/Day/Year

6. Have you ever taken the Uniform CPA Examination? Yes No

If yes, as a candidate of which state? When?

If yes, have you passed the Uniform CPA Examination for any state? Yes No

7. Have you previously taken the International Qualification Examination (IQEX)? Yes No

If yes, it is not necessary to complete this initial application. Please call 866-MY-NASBA or (615) 312-3781.

8. IQEX FEE: U.S. \$845. Application fees must be paid by money order issued in U.S. currency and made payable to NASBA. Fees will NOT be refunded or transferred to future examinations. Any fees submitted in other forms will be returned to the candidate and may cause an application to be incomplete.

9. Are you a member in good standing of the Institute of Chartered Accountants in Australia? Yes No

(a) Your Chartered Accountant permit/membership number

(b) The date on which you qualified as a Chartered Accountant

(c) Have you successfully completed the PY/CA program Yes No

(d) Was all of your education completed in Australia? Yes No (you are not eligible for IQEX)

10. Do you satisfy one of the following educational requirements? Please indicate which category.

- Hold an approved mater's degree with completion of the ICAA PY or CA program.
- Hold a four year baccalaureate or honors degree with completion of the ICAA PY or CA program.
- Hold a three year non-accounting baccalaureate degree with completion of an approved graduate conversion course in accounting, plus completion of the ICAA PY or CA program.
- Hold a three year baccalaureate degree with an approved major in accounting plus completion of the ICAA PY or CA program. (If you are in this category, your education is equivalent only to a U.S. baccalaureate degree)

11. EDUCATION:

College or University		Dates Enrolled		Degree	
Name	Country	From	To	Program	Date Completed

12. CANDIDATES WITH DISABILITIES: Candidates who require modifications in the examination administration because of a disability should download and complete the ADA Modification Form from the IQEX page at www.nasba.org. This form, along with medical documentation, should be submitted at least two weeks prior to the application deadline.

13. Under penalty of perjury, I certify to the truth and accuracy of all statements, answers, and representations made in the foregoing application, including all supplementary statements. I confirm that I have read the "Candidate Bulletin." I agree that in the event my examination responses are lost, any claim I may have will be limited to the examination fee paid by me.

Date

Signature of Applicant

Mail application materials to:
 NASBA
 Att: IQEX
 PO Box 198469
 Nashville, TN 37219