ALASKA

VERIFICATION OF LICENSURE FOR CPA SUPERVISOR

This form is to be completed only if you are certified/licensed United States CPA in a state other than Alaska.

To verify your experience under the direct supervision of a CPA, this form (Section B) must be completed by the licensing authority in the jurisdiction where the supervising CPA holds an active permit to practice. You are advised to check with that Board before forwarding this form to determine if there is a fee or if additional requirements need to be met before the information will be released. After completing Section-A, submit this form to the State Board of Accountancy where the supervising CPA holds a permit to practice public accounting.

Section A: To be completed by the Applicant

Name: __________________________________________________________________________

First Name    Middle Name   Last name

Supervising CPA Information

______________________________________________________________

Direct Supervisor’s Name    Firm / Company

______________________________________________________________

Certificate Number     State where certified / licensed

Duration of supervised experience From: ___________________________ To: ___________________________

Date    Date

SECTION B: To be completed by the Board of Accountancy where the above-named supervising CPA is certified and permitted to engage in the practice of public accounting.

I certify that ____________________________________________________________________, license number ______________________________________ in the state of _________________ held an active permit/license to engage in the practice of public accounting during the entire “Duration of Supervised Experience” as specified above.

Comments: __________________________________________________________________________

_________________________________________________________________________________

Board      Date

Boards Official Signature    Title

RETURN THIS FORM TO:
CPAExam@nasba.org
(If the form is completed with a seal or embossing, it must be visible on the electronic version to be considered official.)

OR
CPA Examination Services – AK
P.O. Box 198469
Nashville, TN 37219-8469