Vermont 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 qualify to sit for the Uniform CPA Examination. All required courses and degrees must be completed no later than 60 days following the date CPA Examination Services receives your first-time application. In conjunction with your application for the Uniform CPA Examination, this form must be submitted directly to CPA Examination Services from the 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 120 days following date CPA Examination Services receives your first-time application. Although you may be permitted to submit a new application to retake failed sections or to sit for new sections before your final official transcript has been received, if you pass the examination, your Successful Candidate letter will not be released until your transcript has been received.

Part 1 - To be completed by the candidat (After completing Part 1, submit this form to the registra		tution where your degree is bein	ng pursued.):			
1. Applicant's Name:						
First Name		Middle Name		Last Name		
2. Date of Birth:	3	3. Jurisdiction ID:				
mm/dd/yyyy		Only available after completely submitting an online ap			<u>_</u>	
4. I understand that I must complete my education application. Failure to meet this deadline will resul required to submit a final official transcript docum following the date CPA Examination Services receive these deadlines.	t in my scores (inclu enting successful co	iding conditional credit) being ompletion of the courses and,	g voided. I fu /or degree lis	rther understan sted below no la	d that I will be ter than 120 days	
Applicant's Signature		Date				
5. Name of academic institution:						
Part 2- To be completed and mailed by the courses in which the candidate is cur	_	ne deddenne mstitution	•			
Course Name			Course Number	Number of Number of Credit Hours	Anticipated Completion Date mm/dd/yyyy	
Degree to be conferred:						
Type (BS, BA, MBA, etc) Major				Expected Graduation Date		
	Signature of	Dean or Registrar		Title		
Seal of Institution			_	Date		

RETURN THIS FORM TO:

<u>CPAExam@nasba.org</u>
(If the form is completed with a seal or embossing, it must be visible on the electronic version to be considered official.)

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