

# APPLICATION FORM FOR APPLYING FOR AN INDIV IDUAL MEMEBR

4 x 6 Photo

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Active Member (Auditor)	Active Member (Accountant)	Affiliate Membe
Associate Member	Student Member	
Purpose of acquiring KICPA	A membership	

## 2 PERSONAL DETAILS

Khmer Name :			
Name in English:			
Date of Birth:	1	Nationality:	
Title: Mr. Ms. Dr.	Other	Marital Status: 🔲 Single 🗌 Married	
ID #	Pa	ssport #	
Tel:	Personal Email:		
Secondary Tel:	Secondary Tel: Workplace Email:		
Resident Address:			
Contact Address:			

# **3** QUALIFICATIONS

Academic Qualifications			
Level of Education:			
Degree:	Institution Name:		
Professional Membership			
Please indicate the professional body or bodies of which you are a member:			
Institute Name:			
Admission Date:			
Institute Name:			
Admission Date:			

# 4 CURRENT EMPLOYMENT

Company:	Position:		
Main Business Activity:			
Contact person:	Position:		
Tel:	Email:		
Company address:			

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5	EMPLOYMENT CATEGORY -			
	Which best describes your orga	nization? 🗌 National [	International	
	PUBLIC PRACTICE			
	Note: For Student Members, please skip this section.			
	If you work in Public Practice, please complete the Job Categories and Number of Partners/ Directors by inserting a tick in the relevant boxes:			
	Job Category			
	General practicing services	Audits Info	rmation Technology	
	Number of Partners/ Director	S		
	Sole Practitioner	etween 2-10 📃 Betweer	n 11-50 📃 More than 50	
	BUSINESS CATEGORY			
	Agriculture	Chemical Petroleum	Computer Service	
	Construction/Civil Engineering	Distributive trade	Education/ training	
	Electronic	Food/ Drink/Tobacco	Government/ Statutory Body	
	Hotel/ Catering/ Leisure	Insurance/Banking/Finance	Consultancy/ Media	
	Mechanical/ Automotive	Manufacturing	Mining	
	Engineering	🗌 Real Estate	Shipping/ Transport	
	Other (please specify)			
	Job Category			
	External Auditing	Financial Accounting	Company Secretarial	
	Internal Auditing	Management Accounting	Taxation	
	Einancial Management	Management Information	System	
	Other (please specify)			
	Size of Organization			
	Between 1 – 10 Staffs	Between 11-30 Between	een 30-60 🗌 More than 60	
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Please answer the following questions by ticking in the boxes at the right-hand side where appropriate. For any "**Yes**", please details in the space below. Please attach a separate sheet if more space is required.

- Have you ever been convicted of any criminal offence?	Yes	🗌 No
<ul> <li>Have you ever been a subject of any investigation by governmental, statutory or professional in respect of any offence involving dishonesty or any complaint for professional misconduct</li> </ul>	Yes	No
- Have you ever been refused entry to any professional body or has your membership or registration with such body terminated or suspended?	Yes	No No
- Have you been a member of KICPAA previously?	Yes	🗌 No
Reason:		

I declare that the information provided in this application is true to the best of my knowledge and belief. I understand that any false or misleading statement in this form could lead to disciplinary action being taken against me and/or may invalidate any decision reached on this application. I shall observe and abide by the KICPAA's By-Law, Code Ethics and others related regulation if I am admitted as a member of KICPAA.

Signature: \_\_\_\_\_

Date:

**NB:** Registration as a member of the KICPAA is subject to the final decision of the Registration and Membership Committee.





### FEES

#### **Application Fee**

The application fee is payable to the KICPAA and must accompany this application. The application fee is not refundable.

No.	Individual Membership Category	Application Fee (USD)		
		Khmer	Foreigner	
1	Active Member	100	100	
2	Affiliate Member	100	100	
3	Associate Member	50	50	
4	Student Member	5	5	

#### **Annual Membership Fee**

The annual membership fee is due upon approval of your membership by the Registration Committee. The membership fee is payable on an annual basis thereafter.

No.	Individual Membership Category	Annual Fee (USD)		
		Local	Foreign	
1	Active Member	150	300	
2	Affiliate Member	100	200	
3	Associate Member	50	100	
4	Student Member	10	10	

# 8 CHECKLIST OF APPLICATION

Application will only be processed if the application is completed and signed, with all supporting documents and fee payment attached. Kindly ensure that you have:

- a. Attached 1 (4 x 6) Photo
- b. Certified true copies of your academic and professional certificates
- c. Updated C.V in detail attached with notification of employment of each company

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- d. A copy of your passport or an Identification Card
- e. Good-standing letter from your professional Institution (Foreigner Only)
- f. Official translations of any documents not in Khmer or English
- g. Receipt of Payment on Application Fee

For enquiries, please contact KICPAA Secretariat at the address provided below:



## 9 FEES

Please send your completed application with payment to:

KICPAA Secretariat,

Kampuchea Institute of Certified Public Accountants and Auditors (KICPAA)

Address: 8th Floor, Vtrust Tower, Street Czech Repulic Blvd (169), Phnom Penh, Kingdom of Cambodia

- Website: www.kicpaa.org
- Telephone: (+855) 23 23 17 07
- Mobile Phone: (+855) 77 24 17 07
- Telegram: (+855) 77 24 17 07
- Email: membership@kicpaa.org

# **10** FOR OFFICER USE ONLY

Application Number:	Received Date:
Payment of Application: Yes No	Amount:
(Must attach the receipt in this application form)	
Application Status: 🗌 Approve 🗌 Disappro	ve
Approved Date: Approved	Membership-Type:
Admiration Date: Memb	pership ID:
Attached: Approval Letter	Membership Certificate