

# APPLICATION FOR A CERTIFICATE OF PUBLIC PRACTICE

The information notes attached to this form will assist you to complete your application. Please read them carefully

## 1 PERSONAL DETAILS – See information note 1

First name(s) – (in full)	
Informal name	Surname
Mr/Mrs/Miss/Ms/Dr other	Date of birth
Institute number	Email
Current employer	Position title
Business address <input type="checkbox"/> (✓ if this is your preferred contact address)	
Postal address	
Physical address	
Direct phone	
Home address <input type="checkbox"/> (✓ if this is your preferred contact address)	

## 2 DETAILS OF PRACTICE – See information note 2

Name of practice
Postal address
Physical address
Date of admission as a shareholder/ director/ partner ...../...../.....

## 3 ACCEPTABLE PRACTICAL EXPERIENCE – See information note 3

Date		Name of employer	Position title
From (month/year)	To (month/year)		

# APPLICATION FOR A CERTIFICATE OF PUBLIC PRACTICE

## 4 PRACTITIONER-SUPPORT MEMBER – See information note 4

(please ✓ as appropriate)

Are you joining an established multi-partner (or multi-director) practice?

Yes No

Has your acceptable practice experience (while a CA) been undertaken in a public practice environment?

If you answered "Yes" to both questions above, please go to section 5

If you answered "No" to either (or both) questions above, please nominate a suitable experienced CPP holder to support you in your first year of practice and include a completed *Support agreement*

## 5 ACCOUNTING SERVICES – See information note 5

Please provide a **thorough** description of the nature of the services you intend to undertake


## 6 COURSE FOR NEW PRACTITIONERS – See information note 6

(please ✓ as appropriate)

Have you attended NZICA's course for new practitioners or an NZICA approved in-house course?

Yes No

If "Yes", what date did you attend?.....

If "No" and you wish to request deferral of this requirement, please ✓ here  to indicate that you agree to attend the next available course at any location in New Zealand

## 7 CRIMES AND OFFENCES – See information note 7. Please read carefully as this is a new requirement.

### Record of New Zealand criminal convictions

NZICA requires that you submit a current criminal convictions record obtained from the New Zealand Ministry of Justice with your CPP application. The appropriate form (Priv/F1) can be downloaded from [www.justice.govt.nz](http://www.justice.govt.nz) Please note your rights under the Criminal Records (Clean Slate) Act 2004 before requesting a copy of your criminal record.

Where you do not have any criminal convictions recorded, you must still submit the record you receive from the Ministry of Justice with your CPP application.

### Overseas police clearances

If you have lived in any country other than New Zealand for periods of twelve months or more during the last 10 years, you are required to obtain police clearance certificate(s) from the country or countries where you have lived. The certificate(s) must be original(s) and less than six months old at the time your application is submitted. Further information about obtaining a police clearance certificate is available on the New Zealand immigration website at [www.immigration.govt.nz](http://www.immigration.govt.nz)

# APPLICATION FOR A CERTIFICATE OF PUBLIC PRACTICE

## Charges pending

Please provide details of any charges pending before a court in New Zealand or overseas:


## 8 BANKRUPTCY AND DISCIPLINARY ACTION- See information note 8

	Yes	No
Are you, or have you ever been, adjudged bankrupt or made the subject of an official assignment for the benefit of your creditors?	<input type="checkbox"/>	<input type="checkbox"/>
Are you, or have you ever been, subject to disciplinary proceedings by a statutory, professional or other body (including the New Zealand Institute of Chartered Accountants) in respect of your professional capacity?	<input type="checkbox"/>	<input type="checkbox"/>
Are you, or have you ever been, prohibited by the Registrar of Companies from managing a company?	<input type="checkbox"/>	<input type="checkbox"/>
Have you failed to satisfy a judgement debt within the last seven years where payment has been ordered by a court in New Zealand or overseas?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been subject to disciplinary proceedings by a tertiary education institution?	<input type="checkbox"/>	<input type="checkbox"/>

Please provide detailed information if you have ticked "yes" to any of the above questions.


If you have been adjudged bankrupt, please provide a copy of the bankruptcy notice from the Official Assignee and a copy of the Discharge of Bankruptcy notice(if applicable). If you have been made subject of an official assignment for the benefit of your creditors, please provide appropriate documentation.

## 9 CHARACTER REFERENCES – See information note 9

<b>Referee 1:</b> First name(s)	Surname
Mr/Mrs/Miss/Ms/Dr other	Designation
Postal address	
<b>Referee 2:</b> First name(s)	Surname
Mr/Mrs/Miss/Ms/Dr other	Designation
Postal address	

# APPLICATION FOR A CERTIFICATE OF PUBLIC PRACTICE

## 10 APPLICATION FEE – See information note 10

Cheques should be made payable to “New Zealand Institute of Chartered Accountants”. The four credit cards below are acceptable for payment. Please enter details below.

### CREDIT CARD PAYMENT DETAILS

AMEX  DINERS  MASTERCARD  VISA

Card expiry date: ...../.....

Card No.:

Cardholder’s name:..... (please print)

Cardholder’s signature:..... Amount paid: \$.....

## 11 CHECKLIST – See information note 11

For your application to be processed quickly, please ensure that you have included the following with your application form (please ✓ as appropriate):

- Letter confirming admission to practice, date and any subsequent change of practice name (if appropriate)
- Application for approval to practise through an approved practice entity (if applicable)
- Certificate of Acceptable Practical Experience (for each period of experience)
- Support agreement (if appropriate)
- Ministry of Justice criminal report, police clearance certificate(s)
- Bankruptcy and disciplinary information (if applicable)
- Letter requesting deferral of course requirement (if required)
- Character references (two are required)
- Application fee

## 12 FURTHER INFORMATION – See information note 12


## 13 DECLARATION – See information note 13

I.....hereby declare that:

The information that is provided in this application is true and correct

I will be bound by the Rules now in force or hereafter voted into existence, and by the Code of Ethics now in force or amended from time to time by NZICA.

I authorise NZICA to lawfully obtain at any time, from any person or entity, any information about me that the Institute considers necessary or desirable to obtain to process this application and to service and maintain my status, and I authorise any such person or entity to release this information to NZICA

Signed: ..... Date: ...../...../.....

# APPLICATION FOR A CERTIFICATE OF PUBLIC PRACTICE

NEW ZEALAND  
INSTITUTE OF  
CHARTERED  
ACCOUNTANTS

## INFORMATION NOTES

### APPLICATION PROCEDURE

Please provide as much relevant information as possible with your application. An incomplete application will not be considered until all the required information and documents have been received by the Institute. Initial consideration may take up to four weeks. If you are asked to provide additional information, then the process may take a little longer.

### PRIVACY ACT

The information provided on this form will be used by the Institute to:  
Processing and assessing this application  
Maintain the membership database  
Enable the Institute to carry out its various functions under the Institute of Chartered Accountants of New Zealand Act 1996 and the Institute's Rules, which may involve disclosure to other agencies for those purposes  
Keeping you informed about products and services that may be of interest to you, which may involve disclosure to selected agencies authorised by NZICA  
Communicating with you and targeting professional development initiatives  
The information will be held by NZICA.

### NOTE 1 – PERSONAL DETAILS

Please provide both your postal and street addresses, if they differ. If any of your details change, you should advise the Institute's Customer Service Centre immediately to avoid any delay in receiving information, products and services. Your name as entered here will appear on any certificates issued by the Institute. Your name will also be published in the NZICA's Journal unless you specify otherwise.

### NOTE 2 – DETAILS OF PRACTICE

Please state the name of your firm or proposed practice and all contact details requested.  
If you are joining an established practice, please attach a letter of confirmation of admittance to the partnership, the date this will happen and any subsequent name change for the practice.  
If you are establishing an entity to offer accounting services to the public, you should submit an application to practice through a practice at the same time as submitting this application. Please refer to the Public Practice section of NZICA's website ([www.nzica.com](http://www.nzica.com)) for the appropriate application form.

### NOTE 3 – ACCEPTABLE PRACTICAL EXPERIENCE

Please provide a summary of the practical experience you have gained within the last seven years.  
To meet the requirement for a CPP, the applicant must have completed two years' acceptable practical experience whilst a member of the CA College. Please refer to the Guidelines for CPP Applicants, for information on experience that will be considered "acceptable". Please also provide a Certificate of Acceptable Practical Experience for each of the periods of experience you wish to have considered for their acceptability.  
It is preferable that Certificates of APE are signed by members of the CA College holding a CPP themselves. In most cases, the applicant's employer is the most appropriate person to complete the form.  
However, NZICA recognises that due to the sensitive nature of some applications (such as where the applicant intends to leave their present place of work to commence practice) this is not always possible or desirable. The form must therefore be verified by an individual in a position to attest to your competence based on workplace evidence, such as an employer, supervisor, manager or CA in a senior role.

### NOTE 4 – PRACTITIONER-SUPPORT MEMBER

If your acceptable practical experience is not from public practice or you are intending to establish a new practice or partnership, you will be required to nominate (with their agreement) a suitable experienced CPP holder to provide you with support throughout your first year in practice. Please refer to the Guidelines for CPP Applicants for information on NZICA's expectations of this relationship.

Please nominate this CPP holder and include a Support agreement with this application. You will be able to download this from the Public Practice section of NZICA's website.

### NOTE 5 – ACCOUNTING SERVICES

The Code of Ethics requires that members only undertake professional work for which they have the competence necessary to perform to the technical and professional standards expected. Please describe thoroughly the nature of the services you intend to undertake.

### NOTE 6 – COURSE FOR NEW PRACTITIONERS

Members are required to have attended the Course for New Practitioners or an NZICA approved in-house course within the two years immediately preceding their CPP application.  
If you have not attended a course for new practitioners, you must request deferral from attendance at the course and commit to attending the next available course.

### NOTE 7 – CRIMES AND OFFENCES

A conviction or offence will not automatically result in a declined application. Each case will be considered individually on its merits. NZICA will keep details in this section confidential.

### NOTE 8 – BANKRUPTCY AND DISCIPLINARY ACTION

A positive answer to any of the questions in this section will not automatically result in a declined application. Each case will be considered on its merits. Details will be kept confidential.

### NOTE 9 – CHARACTER REFERENCES

You are required to provide two Character references from referees other than the signatory for your Certificate of Acceptable Practical Experience. The reference must be on the Character reference form (available from NZICA's website) and must be signed within the six months immediately preceding the CPP application being lodged.

### NOTE 10 – APPLICATION FEE

The current application fee schedule is available from the Public Practice section of NZICA's web site, at [www.nzica.com](http://www.nzica.com). Payment must accompany your application.

### NOTE 11 – CHECKLIST

Please ensure all required documents to support this application are included.

### NOTE 12 – FURTHER INFORMATION

If there is anything else that NZICA should be aware of before issuing you a CPP, please describe this here.

### NOTE 13 – DECLARATION

The information given in this application form is covered by the declaration. The Code of Ethics is enforced by disciplinary powers based on the Institute of Chartered Accountants of New Zealand Act 1996 and the Rules of NZICA.

### CONTACTING NZICA

Membership enquiries and applications are handled by our Customer Service Centre. If you have any queries, please contact NZICA by telephone +64 4 474 7840 or email ([customer@nzica.com](mailto:customer@nzica.com)).

### RETURN ADDRESS

Please send your completed application forms to:

#### Customer Service Centre

New Zealand Institute of Chartered Accountants  
PO Box 11 342  
Wellington, 6142  
New Zealand