

# APPLICATION TO TRANSFER TO FULLY ACTIVE (FULL FEE) MEMBERSHIP FROM RETIRED OR CONCESSIONARY STATUS

This application form is for use by full members of the Institute who wish to transfer to active (full fee) membership from:

- concessionary category (career break); or
- concessionary category (low income); or
- retired status

The Information Notes at the back of this form will assist you in completing your application. Please read them carefully.

## 1 COLLEGE OF MEMBERSHIP – Indicate the College of which you are a member (please tick)

- Chartered Accountant
- Associate Chartered Accountant
- Accounting Technician

## 2 CURRENT MEMBERSHIP STATUS - Indicate your current membership status (please tick)

- concessionary category (career break); or
- concessionary category (low income); or
- retired status

## 3 PERSONAL DETAILS – please use capital letters (See Information Note 1)

Institute ID \_\_\_\_\_

First / Given Name \_\_\_\_\_

Preferred First Name (if different to formal) \_\_\_\_\_

Surname / Family Name \_\_\_\_\_

Title (Mr/Mrs/Ms/other) \_\_\_\_\_

Previous name (if applicable) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Current Employer \_\_\_\_\_

Position Title \_\_\_\_\_

Business Address \_\_\_\_\_

(tick if this is your preferred mailing address)

(tick if this is your preferred billing address)

Postcode \_\_\_\_\_

City / Town \_\_\_\_\_

Country (other than New Zealand) \_\_\_\_\_

Telephone \_\_\_\_\_

Cellphone \_\_\_\_\_

Email \_\_\_\_\_

Fax \_\_\_\_\_

Home Address \_\_\_\_\_

(tick if this is your preferred mailing address)

(tick if this is your preferred billing address)

Postcode \_\_\_\_\_

City / Town \_\_\_\_\_

Country (other than New Zealand) \_\_\_\_\_

Telephone \_\_\_\_\_

Cellphone \_\_\_\_\_

Email \_\_\_\_\_

Fax \_\_\_\_\_

Alternative Address \_\_\_\_\_

(tick if this is your preferred mailing address)

(tick if this is your preferred billing address)

Postcode \_\_\_\_\_

City / Town \_\_\_\_\_

Country (other than New Zealand) \_\_\_\_\_

Telephone \_\_\_\_\_

Cellphone \_\_\_\_\_

Email \_\_\_\_\_

Fax \_\_\_\_\_

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## 4 WORK ACTIVITIES (See Information Note 2)

If you are transferring **to** fully active status **from** concessionary category (career break) or retired status, you should complete the following if you have undertaken any practical experience during this time:

I have been engaged in the following activities while holding concessionary category (career break) or retired status:

From (date)	To (date)	Position	Organisation	Hours per week	Accounting or Accounting-Related Work (Yes or No)

If there are any gaps in employment please explain:

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## 5 CONTINUING PROFESSIONAL DEVELOPMENT (CPD) (See Information Note 3)

I request that the structured CPD hours I have undertaken while out of fully active membership be considered towards meeting the catch-up CPD requirements.  Yes  No

\* Note CPD can only be carried over for the last two years. Refer to guidelines on website for more information

Continuing Professional Development (CPD) For year ending 30 June \_\_\_\_\_

### Personal CPD Log

Date	Course Title (include brief description)	Provider	Structured hours	Unstructured hours
<b>TOTAL HOURS</b>				

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## 6 DECLARATION (See Information Note 4)

I \_\_\_\_\_ declare that: \_\_\_\_\_

1. The information provided in this application is true and correct.
2. I undertake to immediately advise the Institute of any changes in my circumstances that may effect my concessionary status.
3. I will be bound by the Rules now in force or hereafter voted in existence and by the Code of Ethics now in force or amended from time to time by the Council of the New Zealand Institute of Chartered Accountants.
4. I authorise the New Zealand Institute of Chartered Accountants to lawfully obtain at any time, from any person or entity, any information about me that the New Zealand Institute of Chartered Accountants considers necessary or desirable to obtain in order to process this application and to service and maintain my membership, and I authorise any such person or entity to release this information to the New Zealand Institute of Chartered Accountants.

Signed: \_\_\_\_\_ Date:     /     / \_\_\_\_\_

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## INFORMATION NOTES

### APPLICATION PROCESS

This application form is for members of the Institute who wish to transfer to active (full fee) membership from either of the concessionary categories or retired status.

If you are wanting to transfer to career break or low income concessionary status, you should complete the form "Application to transfer to concessionary membership categories". This form is available on the Institute's website – [www.nzica.com](http://www.nzica.com)

For further information on the transferring to active (full fee) membership please read the Information Sheet available on the Institute's website – [www.nzica.com](http://www.nzica.com)

Consideration of your application may take up to four weeks. Please provide as much information as possible that is relevant to your application. An incomplete application will not be considered until all the required information and documentation has been received.

### PRIVACY ACT

The information provided on this form will be used by the New Zealand Institute of Chartered Accountants to:

1. Process and assess this application
2. Maintain the membership database
3. Enable the New Zealand Institute of Chartered Accountants to carry out its various functions under the Institute of Chartered Accountants of New Zealand Act 1996 and the Rules of the Institute of Chartered Accountants, which may involve disclosure to other agencies for those purposes
4. Keep you informed about products and services that may be of interest to you, which may involve disclosure to selected agencies authorised by the New Zealand Institute of Chartered Accountants
5. Communicate with you and target professional development initiatives.

### NOTE 1 – PERSONAL DETAILS

Please provide both postal and street addresses if they differ. If any of these details change, you should advise Registry Services Helpdesk immediately to avoid any delay in receiving information and goods.

### NOTE 2 – WORK ACTIVITIES

Although paid employment is not compatible with a career break or retired status, consideration may be given to any unpaid practical experience undertaken while on a career break or holding retired status.

### NOTE 3 – CONTINUING PROFESSIONAL DEVELOPMENT

Members who have been out of accounting or accounting-related work for a period of less than ten years will be required to complete catch-up CPD. The amount of catch-up CPD will be calculated at the standard per annum rate to a maximum number of hours. **Credit will be given for CPD undertaken by members during their career break or retired status.**

Once your application has been assessed, you will be advised of the amount of any CPD you are required to catch up.

Catch-up CPD will normally need to be undertaken within 12 months of transferring to fully active status.

Members who have been out of accounting or accounting-related work for ten or more years will be referred to the Admissions Board who will determine the requirements they must meet for ongoing membership.

### NOTE 4 – DECLARATION

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

### RETURN ADDRESS

Please send your completed application to:

Registry Services Helpdesk  
New Zealand Institute of Chartered Accountants  
7th Floor, Tower Building  
50 Customhouse Quay  
PO Box 11342  
Wellington 6142

### FURTHER INFORMATION

Membership enquiries are handled by Registry Services Helpdesk

Contact details are:

Registry Services Helpdesk

Tel: 00 64 4-474 7840

Fax: 00 64 4-473 6303

Email: [registry@nzica.com](mailto:registry@nzica.com)

Website: [www.nzica.com](http://www.nzica.com)