

Chartered Professional Accountants of Alberta
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cpaalberta.ca

Request for Certification of Membership with a GAA Member Body

Re: (Print applicant's name)
The person named above has applied for membership in Chartered Professional Accountants of
Please confirm the following information:
Registered name (in full):
Date admitted to membership (mm/dd/yyyy):
Academic Qualifications: University:
This membership was gained by:
completing prescribed practical experience of: years
 virtue of passing the qualifying examination(s) on (mm/dd/yyyy):
CONFIRMATION
is a member in good standing with the
(GAA member body). We know of no reason why membership in Chartered Professional Accountants of province/region) should not be granted.
If such information cannot be given, please explain why:
Name and position:
Signature:
Date (mm/dd/yyyy):

Please return the completed document directly to the address of the provincial/regional CPA body provided on page 2.

Please affix official stamp or seal

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