

Bureau of Professional Licensing PO Box 30670 ● Lansing, MI 48909 Telephone: (517) 241-9288

> www.michigan.gov/bpl BPLHelp@michigan.gov

CPA CERTIFICATE AND LICENSE/REGISTRATION APPLICATION (This Form Should Not Be Used For License Renewal)

Authority: 1980 PA 299, MCL 338.3434a

Legal Name (First, Middle, Last)			Date of	Birth	U.S. Soc	cial Security Number
	Γ			T _		T
Address	City			State		Zip Code
Telephone Number	E-mail Address					
I have the ability and will serve the public in a fair, hon against me, I am rehabilitated or the substance of my f license. Yes No						
EXAMINATION INFORMATION						
Did you take your examination in Michigan?	es - Give Passing D	rate of final section:	mm/yyyy)	No - A	ttach offic	ial certification of exam
Name at time of exam:		·				
REQUIRED ADDITIONAL DOCUMENTS						
 Attach a copy of your transcripts showing completion concentration in accounting, at an educational institu 			including	a baccalaureate	e degree o	or higher degree with a
Name, if different, at the time of attending school: _					_	
 If requesting a fee waiver as an individual who serve demonstrates you were separated from service with 						
Certification						
I certify that the statements in this document are true denial of my application, disciplinary action, or may be pursuant to MCL 338.3434a.						
Signatur	e				Date	
CHECK THE LICENSE/REGIST				FOR O	FICE US	F ONLY
Certificate and License	\$300.00	1101-01=\$115.00 1101-16=\$185.00	License	Number	1102 00	Issue Date
Certificate and License - Veteran (see required additional documents)	Fee Waived					
Certificate and Registration	\$150.00	1101-53=\$ 65.00 1101-16=\$ 85.00				
Certificate and Registration - Veteran (see required additional documents)	Fee Waived					
Make your check or money order in U.S. Currency pays			1			
STATE OF MIC FEES ARE AUTHORIZED BY THE STATE LICENSE FEE ACT		ARE NOT REFUNDABLE.	-			

pies as needed)				
		nt in government, industry, academ	ia or public	
countant.				
I verify that this applicant for the CPA Certificate has earned qualifying experience of through employ				
5(4) from to erstand that any omitted statement,	(Number of Hours) (MM/DD/YY) misrepresentation, or	r fraud may be cause for disciplinar	y action or may	
Licensing Jurisdiction		Daytime Telephone Number	Telephone Number	
		Date		
	earned qualifying experience gaine ear and not more than 5 calendar yestountant. earned qualifying experience of	earned qualifying experience gained through employme than 5 calendar years. countant. earned qualifying experience of through employme than 5 calendar years. countant. earned qualifying experience of through employments that the countain the countain the countain the countain the countain the countain that any omitted statement, misrepresentation, or countain the countain that any omitted statement, misrepresentation, or countain the countain that any omitted statement, misrepresentation, or countain the countain that any omitted statement, misrepresentation, or countain the countain that any omitted statement, misrepresentation, or countain the countain that any omitted statement, misrepresentation, or countain the countain that any omitted statement, misrepresentation, or countain the countain that are considered that any omitted statement.	countant. earned qualifying experience of through employment in government, industry, academ ear and not more than 5 calendar years. earned qualifying experience of through employment in government, industry, academ earned qualifying experience of through employment in government, industry earned qualifying experience of (Number of Hours) 5(4) from	