

# The Institute of certified Public Accountants of Nigeria

The Registrar/Chief executive  
National Head Office:  
A.L. 10, Washishi Road/Lagos Street  
Kaduna. 08033052248



Southern Co-ordinating Office  
18 Olowu Street, Ikeja Lagos  
P. O. Box 1438

## PROFESSIONAL EXAMINATION ENTRY FORM

SURNAME: .....

OTHER NAMES: .....

STUDENT ADDRESS: .....

EXAMINATIONAL CENTRE: .....

DATE OF EXAMINATION: .....

TICK YOUR PART ENTRIES WITH ( )

PROFESSIONAL EXAMINATION:

- LEVEL I: (FEE: )**
- 1. Financial Accounting I
  - 2. Economics
  - 3. Law I
  - 4. Business Mathematics and Statistics
  - 5. Public Administration
  - 6. Management of Organisation
- LEVEL II: (FEE: )**
- 7. Petroleum & Mineral Accounting 8. Cost Account
  - 9. Auditing 10. Data Processing & System Analysis
  - 11. Taxation 12. Public Finance
- LEVEL III: (FEE: )**
- 13. Financial Accounting II 12. Law 2 15. Management Accounting
  - 16. Management Information System 17. Public Sector Accounting
  - 18. Qualitative Analysis
- LEVEL IV: (FEE: )**
- 19. Advance Financial Accounting 20. Taxation & Tax Management
  - 21. Auditing & Investigation 22. Financial Management
  - 23. Petroleum Management 24. Managerial Economics

STUDENT REGISTRATION NUMBER: .....  
HAVE YOU EVER SAT FOR THE INSTITUTE'S EXAMINATIONS OR HAD ANY EXEMPTIONS: YES/NO  
IF YES, THEN ATTACH EVIDENCE.

TOTAL AMOUNT PAID: CHEQUE/CASH: .....

I HAVE READ AND UNDERSTOOD THE EXAMINATION REGULATIONS AND PROMISE TO COMPLY  
THERE WITH:

METHOD OF STUDY FOR THE EXAMINATIONS: .....

.....  
Date

.....  
Student's Signature

**FOR OFFICIAL USE ONLY**

No.	VERIFICATION OF DOCUMENTS	TICK	SIGNATURE	DATE
1	Registration details checked			
2	Result details checked			
3	Examination fee checked			
4	Annual Subscription payment checked			
5	Photographs and self-address envelop checked			

If you are interested in sitting the next examination, please complete this form and submit at the following address ONLY.

A. *The Registrar/Chief executive*  
*National Head Office:*  
*AL 10, Washishi Road/Lagos Street*  
*Kaduna. 08033052248*

B. **PORT HARCOURT**  
 Chief S. O. Ogugu, CPA  
 Min. of Finance & Economic planning  
 Treasury Headquarters,  
 Block B, Room 324,  
 State Secretariat Complex,  
 Port Harcourt.

C. *Southern Co-ordinating Office*  
*18 Oluwu Street, Ikeja Lagos*  
*P. O. Box 1438*

**INSTRUCTION TO CANDIDATES**

1. Before returning completed application forms to the Institute, please complete and check the list below to ensure that the necessary documents have been attached to the application. Failure to comply strictly with the checklist may result in rejection of your application.
2. **NOTE: LATE SUBMISSION OF EXAMINATION FORM AFTER THE CLOSING DATE WILL ATTRACT A FEE OF N300.00. PLEASE NOTE THAT POSTAL DELAYS WILL NOT BE ALLOWED.**
3. **ENTRY CANNOT BE WITHDRAWN NOR THE FEES REFUNDED AFTER THE CLOSING DATE FOR SUBMISSION OF APPLICATION.**
4. **DOCUMENTS REQUIRED TO ACCOMPANY APPLICATION**
  - a. Three recent passport photographs (*Wait and Take Not Acceptable*)
  - b. Three stamped and self-addressed official envelopes
  - c. Original Photocopy of the receipts of annual subscription up-to-date (From date of Registration)
  - d. ICPAN Examination fee receipt
  - e. Photocopy of Registration Certificate
  - f. Photocopy of previous result
  - g. Photocopy of Examination Certificate