

## APPLICATION FORM FOR MEMBERSHIP

Grade of membership for which you wish to be considered:	Annual Subscriptions
<b>Postgraduate Level:</b>	
<b>Certified Management Accountant (CMA)</b> - Degree or Professional Qualification in Accounting, completion of CMA units and 5 years relevant experience	<b>HK\$1,900</b>
<b>Graduate Level:</b>	
<b>Associate Management Accountant (AMA)</b> - Degree or Professional Qualification in Accounting and 3 years relevant experience	<b>HK\$1,700</b>
<b>Graduate Management Accountant (GMA)</b> - Degree or Professional Qualification in Accounting or completion of GMA Program	<b>HK\$1,600</b>
<b>Technical Level:</b>	
<b>Registered Business Accountant (RBA)</b> - Advanced Diploma in Accounting or equivalent*, or completion of RBA Program	<b>HK\$1,500</b>
<b>Registered Cost Accountant (RCA)</b> - Diploma in Accounting or equivalent*, or completion of RCA Program	<b>HK\$1,500</b>

### Part 1 - Personal Information

\*Please specify information in the blank provided

Title: (Dr / Mr / Mrs / Ms/ Miss / Other\*)  Preferred Name:

First Name:  Middle Name:  Surname:

Date of birth (DD/MM/YY):  Sex:  Male  Female

\* Name to appear on certificate:

### Part 2 - Contact Details

Mailing Address:      Home      Business

Address 1:

Address 2:

Suburb:  City / Region:  Country:

Home No.:  Work No.:  Mobile:

Fax No.:  Email:

### Part 3 - Education Background

Please list University and Post School courses / qualifications either obtained or currently being undertaken that will fulfill the entry requirements of the Institute of Certified Management Accountant programs. These may include degrees, graduate diplomas, and any professional or other relevant qualifications.

Qualification	Institution	Completion Date
1		
2		
3		

**- Please provide Transcripts of Awards or Qualifications obtained**

#### \*Note on Accounting Qualification

Recognised accounting qualification is either:

- An undergraduate degree with an accounting specialisation (at least 25% of the degree must be accounting and finance subjects) from an accredited university.
- An MBA from an accredited university that includes financial and management accounting and corporate finance, or
- A professional accounting qualification from a body granted a Royal Charter or Government Charter. "Certified" bodies may also be acceptable upon assessment on a case-by-case basis.

Please complete and forward the ORIGINAL form and documents# to:

**ICMA - Hong Kong Office**  
**12/F, Tai Yip Building**  
**141 Thomson Road**  
**Wanchai**  
**HONG KONG**

#Certified true copies required.

For enquiries, please contact:  
 T: (852) 2574 1555  
 F: (852) 2574 1455  
 E: info@cmaaustralia.hk

[www.cmaaustralia.hk](http://www.cmaaustralia.hk)

## Part 4 - Present / Most Recent Employment Details

Employer's Name:

Date of Appointment:  Position:

Employer Address:

Suburb:  City / Region:  Country:

**- You must provide company letters and your Curriculum Vitae detailing information of management accounting experience that may contribute towards your application.**

## Part 5 - Industry & Company Size

Advertising / Marketing	Mining
Communications	Property Services
Public Utilities	Professional / Business Services
Government	Financial Services
Sport / Entertainment / Recreation	Education
Agriculture / Forestry / Fishing	Insurance
Construction	HR & Recruitment
Health / Community Services	Wholesale / Retail Trade
Manufacturing	E-Business / E-Commerce
Printing / Publishing	Finance & Banking
Logistics & Storage	Hospitality & Tourism

### Number of Employees:

<10	21 - 50	11 - 20	51 - 100
101 - 200	201 - 300	301 - 500	501 - 1000
1000+			

## Part 6 - Professional Memberships

Have you previously been a member of the CMA?	Yes	No
If yes, what was your previous Member ID?		
Are you currently registered on the CMA Student Register?	Yes	No
If yes, what was your Student Registration number?		
Has the CMA / NIA assessed your qualifications for immigration purposes?	Yes	No
If yes, please state your QAI reference number		
Have you ceased to be a member of any professional body?	Yes+	No
Have you ever been refused admission to the CMA or other professional body?	Yes+	No
Have you any criminal convictions?	Yes+	No
Have you been the subject of an unfavorable decision by a professional body or Regulator? + Please provide details in a signed attachment	Yes+	No

Please list out membership of other professional bodies (please attach certified true copies of current membership certificate and current paid invoice)

Professional Body	Membership Status	From MM / YY	To MM / YY
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How did you hear about us?  
\*Please specify:

Broadcast Media\*

Print Media\*

Online search engine\*

Online advertisement\*

By personal referral

Other referral\*

## Part 7 - Professional Interest

Please select the topics that you would like to receive information about (*you may select more than one*):

- |                                     |                               |
|-------------------------------------|-------------------------------|
| Auditing - External                 | Advisory Services             |
| Management Consulting               | Company Secretarial           |
| Ethics                              | External Reporting            |
| Financial Markets                   | General Management            |
| Information Management / Technology | Insolvency and Reconstruction |
| Management Accounting               | Public Sector Issues          |
| Securities / Funds Management       | Auditing - Internal           |
| Treasury                            | Corporate Governance          |
| Banking                             | Financial Control             |
| E-Business / E-Commerce             | Human Resources / Training    |
| Financial Planning                  | Insurance                     |
| Industrial Relations                | Marketing / Sales             |
| Law                                 | Small Businesses              |
| Risk Management                     |                               |

## Part 8 - CMA Membership (To be completed by all applicants for CMA Membership Status)

I have completed ICMA's CMA Program or obtained full credit for the program by undertaking a study program.

Student Number:  from (ICMA or University)   
in year  (*Please provide transcripts or certificate of completion for units completed*)

## Part 9 - Your Communication Preference

How would you like us to contact you?  Email  Mail  Fax

## Part 10 - Payment & Fees

Membership Subscription Fees  HK\$  *Please tick:*  
Other Fees  HK\$   
TOTAL =  HK\$

Payment by EPS Amount  HK\$

Payment by Cheque\* Amount  HK\$

Cheque Number  Bank Name

*\*Please make cheque payable to "CMA Australia".*

Payment by Bank Transfer \*\* Amount  HK\$

Bank: DBS

Account Name: CMA AUSTRALIA

Account No.: 016-494-471189175

*\*\*Please submit a copy of the bank-in slip.*

## Part 11 - Acceptance of Membership Rules

I,  (full name) wish to become a  (grade of membership)

member with the Institute of Certified Management Accountants. I fully understand that I am not, and cannot claim to be a qualified member of the Institute until the relevant membership application has been approved by the Institute. In the event of my admission as a member, I agree to be bound by the Rules of the Institute of Certified Management Accountants for the time being in force.

Signature of Applicant

Date