

FORM FOR VERIFYING CHARTERED ACCOUNTANT STATUS

(Applicants seeking CPA licensure in Georgia who have been supervised by a chartered accountant must obtain verification from the agency which granted the supervisor a license or permit to practice public accounting. **This form should be returned to the applicant.**)

TO THE GEORGIA STATE BOARD OF ACCOUNTANCY:

I hereby certify that _____ is the holder of a valid
(Name of Certificate/License Holder)
and unrevoked certificate or license in _____
(Name of Country)

constituting a recognized qualification for the practice of public accountancy in such country which includes the performance of auditing and other attest work. I further certify that this certificate or license is current and in good standing.

Signature of Licensing Official

BOARD

Date

SEAL

NOTE: If Board has no seal, the signature must be acknowledged before a Notary Public or official witness.

NOTARY PUBLIC

Sworn to and subscribed before me this
____ day of _____, 20 _____

Notary Public Signature

My Commission Expires

(Applicant should complete this portion of the form.)

NAME OF APPLICANT: _____
First Middle Last

ADDRESS: _____

