

Request for evaluation – Application for admission by affiliation

⚠ Personal information will be requested from you to help us process this request. Please note that by filling out this form, which is required to file a request, you authorize this information to be collected and used by the Order.

Do you have questions, requests or comments?

Visit the [Protection of personal information](#) section of our website, where you will find our [guideline](#).

It is important to download and **save your form** to your workstation **before you start** filling it out so that you do not lose any data.

Part 1 Personal information

First name

Last name

--	--

Part 2 Expected professional situation in Quebec at the time of admission by affiliation

2.1. Please check the appropriate boxes:

- I will be offering to third parties professional services included in the practice of the CPA profession, as a partner, shareholder or self-employed member, whether compensated or not.
- I will be practicing in a firm or an entity offering to third parties professional services included in the practice of the CPA profession, as an **employee** or a **contract employee**.
 - I will be a salaried employee.
 - I will be a signatory¹ for one or several types of mandates.
- I will be a salaried employee in industry, the public or parapublic sector, or I will be operating an enterprise whose business activities will not include offering to third parties **any** professional services included in the practice of the CPA profession.
- I will be seeking employment
 - to offer my services to third parties as an employee or a contract employee.
 - in industry.
- I will be unemployed.

¹ Authorized to sign reports or other documents related to the practice of the profession, as defined in section 4 of the *Chartered Professional Accountants Act*.

2.2. If your answer to question 2.1 is that you will be offering to third parties professional services included in the definition of the practice of the CPA profession, as a self-employed member, partner, shareholder, employee or contract employee, whether compensated or not, please specify for each service, whether you intend to offer it and if you participated in these types of mandates in the LAST FIVE YEARS.²

Public accountancy, assurance and other engagements				
Professional services	I will offer this service		I participated in such a mandate in the last five years	
	Yes	No	Yes	No
Compilation engagements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Review engagements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Audit engagements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assurance and other engagements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Management accounting and performance management				
Professional services	I will offer this service		I participated in such a mandate in the last five years	
	Yes	No	Yes	No
Comparative analysis (benchmarking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feasibility analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost and/or product and service profitability analysis/financial analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Budgeting and financial forecasts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity-based costing/management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Costing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance management and identification of performance indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operational management and administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business process reengineering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Taxation and financial planning				
Professional services	I will offer this service		I participated in such a mandate in the last five years	
	Yes	No	Yes	No
Personal taxation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corporate taxation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commodity taxes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal financial planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trusts and estates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International taxation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Governance and strategy				
Professional services	I will offer this service		I participated in such a mandate in the last five years	
	Yes	No	Yes	No
Risk management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Governance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic planning and management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other professional activities				
Services professionnels	I will offer this service		I participated in such a mandate in the last five years	
	Yes	No	Yes	No
Analysis, design and implementation of management information systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal audit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IT auditing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compliance with laws and regulatory requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business start-ups and turnarounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business valuations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financing and negotiations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mergers, acquisitions and sale of businesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cash management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insolvency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investigative and forensic accounting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic data processing (including bookkeeping and payroll)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Due diligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Small claims mediation (tax)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Civil and commercial mediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

² Under section 18 of the *Code of ethics of chartered professional accountants*, all members must keep abreast of developments in the fields of practice of their profession. Furthermore, under section 19, they may not undertake work for which they are not sufficiently prepared or for which they do not have the proficiency or knowledge required without obtaining the necessary assistance. Moreover, only public accountancy permit holders may issue audit or review reports.

2.2.1: If you completed section 2.2, under what status(es) do you plan to provide these services?

As a(n):

- Owner of a CPA office, firm, or partnership or company, or as a contract employee
- Employee of a CPA office, firm, or partnership or company
- CPA member practicing in a professional services firm not held by CPAs

Chosen legal form:

- Self-employed
- Sole proprietorship
- General partnership (GP)
- Joint-stock company (JSC)
- Limited liability partnership (LLP)
- Undeclared partnership (UP)

Firm name

Quebec enterprise number (NEQ)

Title of position

Position start date

_____ | YYYY | MM | DD |

Mailing address

Apt./Office

_____ | _____

City

Province

Postal code

Country

_____ | _____ | _____ | _____

Telephone (work)

Extension

Email address

_____-_____-_____ | _____

Who will be your target clientele? (Please check the boxes that match your situation)

- Individuals
- Individuals made up exclusively of your immediate family members (spouse, child(ren), parent(s), brother(s), sister(s) or grandparent(s))
- Private corporations
- Public corporations
- Non-profit organizations

2.3 If your answer to question 2.1 is that you will be a salaried employee in industry or the public or parapublic sector, please specify the nature of your duties by briefly describing your tasks and responsibilities.³

2.4 Will you administer or hold property and sums of money belonging to third parties? Yes No

Refer to the Administration and holding of property and sums of money belonging to third parties section of the Order's website to learn about the requirements that you must meet.

For instance, if you hold sums of money belonging to third parties, you must deposit them in a trust account and submit the opening a trust account form to the Order.

³ Aforementioned, note 2

Part 3 Declaration and signature

- I declare that the information provided on this form is true, that the form is completed in full and that the required documents have been attached. I understand that any false representation or incomplete statement could have significant consequences.

Signature (compulsory)

_____| ____| ____|
Date

Part 4 Documents to include with your application

- An up-to-date resumé
- Professional liability insurance declaration



Using a secure transmission method that protects confidential information*, please return this duly completed and signed form along with the required documents by email to tableauCPA@cpaquebec.ca.

Information

514 288-3256 [2611] 1 800 363-4688 sep@cpaquebec.ca

*For example, a secure link, a secure email, a document protected by password sent in a separate email, an encrypted USB key, etc.