

INSTITUTE OF CHARTERED ACCOUNTANTS, GHANA



FELLOWSHIP APPLICATION FORM

a recent passport picture with a white background (not more than 6 months old)

1.1 (Mr./Mrs./Miss/Dr./Prof./Rev)
 SURNAME OTHER NAMES (*IN FULL*, NOT INITIALS)

1.2 Gender (*Tick as appropriate* √) Male Female

1.3 Nationality 1.4 Age 1.4.1 Date of Birth

1.5 Home /Residential address: 1.5.1 GPS Address

1.6 Postal Address:

1.7 Contact Number: 1.7.1 Email:

2.0 Date of Admission into Membership:

2.1 Current Employer:

2.2 Designation/Position:

2.3 CPD Credit Hours for 2021 (35 Credit Hours):

3.0 Annual subscription paid consecutively for 10 years? ---Yes --- No

4.0 Character declarations:
 the matter relates to a criminal conviction, provide the date and nature of the offence, full details of the

1. Have you ever been charged with any offence that is currently awaiting legal action?

... Yes No

removed from official records?

... Yes No

3. Have you ever been subject of an arrest warrant or Interpol notice?

... Yes No

4. Have you ever been found guilty of a sexually-based offence involving a child or adult?

... Yes No

5. Have you ever been acquitted of any offence on the grounds of unsoundness of mind?

... Yes No

6. Have you ever been associated with an organisation engaged in violence or engaged in any act of violence (include war, insurgency, freedom fighting, terrorism, protest) either locally or overseas?

... Yes No

7. Have you ever been involved in people smuggling or people trafficking offences?

... Yes No

DECLARATION BY APPLICANT

Caution: Giving misleading information is a serious offence.

1. I have read and understood the information provided in this application.

... Yes No

2. I have provided complete and accurate information in every detail on this form or any attachments provided.

... Yes No

3. I understand that if the information provided is found to be misleading or incorrect after the Fellowship has been granted, it will subsequently be revoked and I shall be sanctioned.

... Yes No

circumstances (example, change of address) or any information provided on this application.

... Yes No

declaration made is punishable under Section 60 of Act 1058 and Section 133 of Act 29.

Yours faithfully,

Signature

Date.....

Declaration by Referees:

I declare that the information provided on this form by the applicant is infallible and accurate.

Name and contact of Referee 1	<i>Both Referees must be ICAG Members in good standing</i>	Name and contact of Referee 2

FOR OFFICIAL USE

**Name & Signature of Director,
Members Services**

**Name & Signature of Admissions
Committee Member**

**Name & Signature of Admissions
Committee Chairperson/Council
Member**