



# APPLICATION TO REGISTER A CHARTERED ACCOUNTANT STUDENT

Complete and submit this form to register a chartered accountant student with ICAEW. You must be an authorised training employer (ATE) to do so. If your student has already completed a period of approved training under a training agreement please use the **Re-registration form**.

## 1. THE STUDENT PLEASE USE BLOCK CAPITALS

Family name/Surname	Mr, Mrs, Miss, Ms (or other title)
Given name(s)/Forename(s)	
Private address	
Postcode/Zipcode	Country
Telephone	Date of birth
Email	

Do you already have an ICAEW number?  Yes  No  
If yes, ICAEW number (if known)

## 2. THE TRAINING ORGANISATION PLEASE USE BLOCK CAPITALS

Name of organisation	Training office number
Office address (where student is based)	
Postcode/Zipcode	Country
In case of queries, please contact (name)	
Telephone	Email

(a) I apply to register the chartered accountant student named above and I confirm that the student has been provided with an employment contract and an ICAEW training agreement.

(b) The training agreement began on  /  /  and is for  months of approved training.  
DD MM YY

(Please return this form within one month of the start date)

(c) The student's starting salary is £

(d) I confirm that the above details are correct and that the student's details have been verified, or will be verified very shortly by reference to documentary evidence of the qualifications claimed. I understand that the training agreement should be cancelled if the student fails to produce the documentary evidence.

Signature:

Date:  /  /   
DD MM YY

(Qualified person responsible for training (QPRT) or authorised signatory)

Full name on QPRT

For office use only

### 3. SECONDARY EDUCATION

Level (eg, GCSE, A-level)	Title	Grade	Year of award	Country

### 4. DEGREE

Designation (eg, BSc)	Title	Class/grade (eg, 1,2)	Year of award	University/ HE institution	Type (full time, sandwich, part time)	Country

### 5. OTHER ACADEMIC QUALIFICATION

Title	College/Institution	Designation (eg, HND)	Class/grade	Year of award	Country

### 6. PROFESSIONAL QUALIFICATION

Professional body	Status (eg, member, student)	Examination stage(s) passed	Country

## MANDATORY DECLARATIONS

Please note that the provisions of s4.2 of the Rehabilitation of Offenders Act 1974 do not apply in the case of persons seeking to become chartered accountants.

At the point of initial registration with ICAEW students are required to declare any act or default likely to bring discredit on themselves, ICAEW or the profession of accountancy, however long ago the offence or circumstances occurred. Offences or circumstances occurring following initial student registration should be declared to ICAEW as soon as is practicably possible. If you are found to have failed to disclose this information your registration may be revoked or later membership prevented or withdrawn.

### Acts requiring disclosure would include (but are not limited to):

- being found guilty of (or having pleaded guilty to) any criminal offences;
- having been charged with a criminal offence which is as yet to come to trial;
- entering into an Individual Voluntary Arrangement or similar composition with creditors;
- failing to satisfy a judgement debt;
- being the subject of an adverse finding by a professional body or regulator;
- having had a disqualification order made, or having given a disqualification undertaking, under the Company Directors Disqualification Act 1986, or similar overseas legislation; or
- having entered into bankruptcy or being a discharged bankrupt.

If any of the above statements apply to you, or you think that there are similar matters which you should declare, please attach details with your registration.

Do any of the above circumstances (or similar) apply to you?  Yes  No

## DISABILITY INFORMATION

Do you have a short-term or long-term impairment, medical condition, indisposition or specific learning difficulty, such as dyslexia, that might:

- affect any examinations and for which you require support from ICAEW?
- affect any service or facility offered by ICAEW for which you may require support?

Do you wish to notify ICAEW of any condition that may fall under the above?  Yes  
(please enclose details with your registration).

All information disclosed will be treated in the strictest confidence and will not be passed on to your employer or any third organisation without your consent. If you have any questions or are not sure whether you should complete this section of the form, please contact our student support team on +44(0)1908 248 250.

If your condition means you will need alternative exam arrangements, we will ask you to complete a more detailed form and provide supporting evidence.

## ETHNIC ORIGIN

At the request of the Equality and Human Rights Commission, you are invited to indicate your ethnic origin by ticking one of the following boxes.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> White British – English         | <input type="checkbox"/> Mixed White and Black African | <input type="checkbox"/> Black Caribbean    |
| <input type="checkbox"/> White British – Scottish        | <input type="checkbox"/> Mixed White and Asian         | <input type="checkbox"/> Black African      |
| <input type="checkbox"/> White British – Welsh           | <input type="checkbox"/> Mixed other                   | <input type="checkbox"/> Black other        |
| <input type="checkbox"/> White British – other           | <input type="checkbox"/> Asian India                   | <input type="checkbox"/> Chinese            |
| <input type="checkbox"/> White Irish                     | <input type="checkbox"/> Asian Pakistani               | <input type="checkbox"/> Malay              |
| <input type="checkbox"/> White other                     | <input type="checkbox"/> Asian Bangladeshi             | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Mixed White and Black Caribbean | <input type="checkbox"/> Asian other                   | <input type="checkbox"/> Do not wish to say |

## STUDENT'S CERTIFICATE

I agree that during the existence of this training agreement and for any period up until I am admitted as a member of ICAEW, I will:

- comply in all respects with the provisions of the Royal and Supplemental Charters, the Bye-laws and Regulations of ICAEW which are applicable to students;
- use every effort to further the objects of ICAEW;
- observe and uphold the ethical and professional standards of ICAEW;
- provide copies of my training records to ICAEW on request; and
- provide promptly and willingly all possible information and assistance if asked to do so by ICAEW in accordance with its duties.

I confirm that:

- the given details are correct;
- I have been provided with an employment contract and ICAEW training agreement; and
- I have not previously completed any period of approved training under a training agreement.

Signature of student

Date

 /  / 

DD

MM

YY

**Using your personal information.** We will treat any personal information collected on this form in accordance with data protection legislation. We will use your information for administration, communication and research. To do this we will share your information with our student and district societies and with organisations that help us administer our training and exams. We may transfer your information outside the European Economic Area (EEA) eg, to one of our offices. These countries may not have similar data protection laws to the EEA. So, if we do transfer your information we will take the necessary steps to ensure that your privacy rights are still protected. For more information about our data protection policy please go to [icaew.com/dataprotection](https://www.icaew.com/dataprotection).

Please return this form to:  
Applications, Learning & Professional Development  
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