



PAKISTAN INSTITUTE OF PUBLIC FINANCE ACCOUNTANTS

APPLICATION FOR ADMISSION AS MEMBER

Affix
2 Photos

Secretary,
Pakistan Institute of Public Finance Accountants, Karachi.

I hereby apply for admission as Associate/Fellow member of Pakistan Institute of Public Finance Accountants (PIPFA) and agree to abide by the Regulations of PIPFA in force or which may thereafter be made from time to time.

1. Name: _____

2. Father / Husband Name: _____

3. Date of Birth: _____ CNIC No: _____

4. Occupation: (Please tick)

Self Employed	<input type="checkbox"/>	Sector Government	<input type="checkbox"/>	Industry	<input type="checkbox"/>
Business	<input type="checkbox"/>	Public / Semi-Government	<input type="checkbox"/>	Trade	<input type="checkbox"/>
Job	<input type="checkbox"/>	Private	<input type="checkbox"/>	Services	<input type="checkbox"/>

5. Address (Office): _____
_____ City: _____

Designation: _____ Organization: _____

6. Address (Residential): _____
_____ City: _____

7. Preferred Mailing Address: Office Residential:

8. Tel (Office) _____ Tel (Residence) _____ Fax #: _____

Mobile No: _____

Email: _____

9. Professional Membership:

ICAP (Fellow / Associate) No: _____

ICMAP (Fellow / Associate) No: _____

Others (Please Specify): _____

10. Particulars of Education (Starting from Matric / O Level):

Exam Title	Institution	Passing Year

11. Experience (Starting from latest job):

Job title	Organization	Business Sector	Period	
			From	To

12. Particulars of Training Completed:

Nature of Training	Organization	Period	
		From	To

13. Name and Address of two persons (Members of PIPFA, ICAP or ICMAP) for recommendation / reference.

Name of Member	Membership No.	Address

Note: If needed, details for items 11 to 13 can be given on separate sheet.

I _____ hereby certify that the above statements are correct and do hereby agree that in the event of my admission as a Member of PIPFA, I will be governed by the regulations made thereunder, that I will advance the objects of the PIPFA as far as shall be in my Power. I shall signify in writing to the Secretary that I am desirous of withdrawing from the Institute and I shall (after the payment of any arrears which may be due to me at that date and after the return of my certificate of membership) be free from this obligation.

Demand Draft / Pay Order / Crossed Cheque No. _____ Payable at any branch of a bank at Karachi for Rs. _____ drawn at _____ branch is enclosed.

Date

Signature of Applicant

(Sign must match with signature of CNIC. In case of difference an undertaking will need to be signed)

Documents required: • Attested Copy of NIC • 2 photographs (Name written on reverse) • Updated Resume • Attested copies of all educational & experience certificates. (At least 2 year experience in Audit & Accounts field either before or during Studies).

Fee Structure: For Associate Membership: Rs. 8,900 (inclusive of Rs. 2800 Annual Subscription, Card Fee Rs. 600)
For Fellow Membership: Rs. 12,400 (inclusive of Rs. 3500 Annual Subscription, Card Fee Rs. 600)