



Credential reinstatement application for members of Chartered Professional Accountants of Canada (CPA Canada)

1. Applicant profile

Member name _____ Birth date (MM/DD/YY) _____ Gender Male Female
Firm or organization _____
Home address _____ Business address _____ Floor/suite _____
City _____ Province _____ Postal code _____ City _____ Province _____ Postal code _____
Telephone _____ Fax number _____ Telephone _____ Fax number _____
Email address _____ Country _____ Email address _____ Country _____

Please check here if you do not want your information to appear in the CFF referral database.

2. Applicant qualifications

The qualifications for the CFF credential are based on the following CFF body of knowledge areas:

- Bankruptcy and insolvency
- Computer forensics
- Economic damages
- Family law
- Financial statement misrepresentation
- Fraud investigation, detection and response
- Litigation support
- Stakeholder disputes
- Valuations

CPA Canada member number: _____

3. Declaration of intent

Please read and indicate your agreement below.

Declaration

I affirm that my statements given in the CFF application (and any attachments and additional information I have provided) are true and complete to the best of my knowledge. I understand that any misrepresentation or omission of facts therein is cause for denial or revocation of the right to use the CFF credential. If so requested by the AICPA, I will provide all additional information or documentation as deemed necessary for the verification of the information given here.

Maintenance of the credential

To maintain the CFF credential, credential holders must pay an annual fee to the AICPA and comply with the following requirements:

- 1) Maintain membership in good standing in CPA Canada.
- 2) Recertify annually. Recertification currently requires that CFF credential holders complete 20 hours of continuing professional development within the credential body of knowledge annually:
 - Continuing professional development may include structured learning activities approved by NASBA or a legally constituted state authority, or other professional body, or unstructured learning activities as outlined by the AICPA.
 - Unstructured learning activities may constitute up to 50% (10 hours annually) of a credential holder's CPD to meet credential renewal requirements.

Agreement

- 1) I understand that I may not use the CFF credential or hold myself out as a CFF until I have received official notification of my CFF certification from the AICPA.
- 2) I authorize investigation of all information I provided in the CFF application.
- 3) I understand that permission to use the CFF credential is granted for a period of one year. At the end of such period, if the CFF certification is not renewed, certification expires and any right to use the CFF credential expires.
- 4) I understand that if I fail to comply with the maintenance of credential requirements, I agree to cease use of the CFF credential immediately, and understand that in order to regain CFF certification, all initial requirements, including completion of the CFF application, must be met again.
- 5) I understand that the recertification requirements noted under Maintenance of the Credential are subject to change as deemed appropriate by the AICPA.

- 6) I further understand and agree that the AICPA has the absolute and unrestricted right to revoke any rights I have to use the CFF credential if I fail to maintain membership in good standing with CPA Canada.
- 7) I affirm that I have read and agree to the items in the Declaration of Intent. I further certify that I understand that a percentage of CFF applications will be randomly selected for further review and that, if selected, I will be required to provide detailed documentation (including specifics of business experience and lifelong learning) to support the assertions of the application. Failure to provide documentation will be considered as non-compliance with the requirements for maintenance of the CFF credential.

Signature _____ Date _____
Inserting your name here electronically will serve as a valid representation of your signature and will be considered binding.

4. Payment information

The reinstatement fee of \$100 and application fee for the CFF credential is due upon application submission. Please indicate your credential or membership status, as well as your method of payment, below.

- Former CFF credential holders** \$600 USD (includes complimentary AICPA International Associate and Forensic and Valuation Services Section membership)
- Please bill my credit card** (Check one)
 (Please note that your credit card payment will be processed upon the approval of your application.)
 - Visa MasterCard Discover American Express

Card number _____ Expiration date _____

Billing address _____

City _____ Province _____ Postal code _____

Print name of credit card holder _____

Signature _____

Application and payment can be mailed to:
CFF credential
AICPA
ATTN: Member Service
220 Leigh Farm Road
Durham, NC 27707 USA
 Or fax to: +1.919.419.4795

Please note: Acceptance of payment does not signify approval of your application. Upon approval, you will receive a welcome kit advising you of your authorization to use the CFF credential.

Email: CFF@aicpa.org
 Call: +1.919.402.4500 (M–F 9am–6pm ET)



P: +1.919.402.4500 | F: +1.919.419.4795 | E: CFF@aicpa.org | W: aicpa.org/CPACanada

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