STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

BOARD OF ACCOUNTANCY

1511 Pontiac Ave., #68-1 Cranston, Rhode Island 02920

PLEASE READ THE FOLLOWING INFORMATION

Chapter 5-3.1 of the General Laws, as amended, requires an annual license/permit by all persons practicing public accounting in the State of Rhode Island.

An **INDIVIDUAL** application for a permit to practice public accounting is below. Make certain that **all data** required is noted on the application, including CPE hours on the **back** and that the **original** form is returned to the office of the Rhode Island Board of Accountancy. Due to a three-year licensing cycle, please send an email inquiry to the Board office at **boa@dbr.ri.gov** so that we can determine what the application fee would be depending on time frame the application was submitted and alphabetical grouping.

The application must be completed in its entirety, which includes cumulative CPE. Spreadsheets will not be accepted. All CPE must be coded as listed on the application itself or the application will be returned as incomplete. A minimum of 120 credits is mandatory. CPE is based on calendar year, while licensing period is fiscal year.

You are reminded that **no fractional hours** may be used and to note the following limitations and requirements:

- <u>Code 1</u> (self-study) cannot exceed **80** hours (over the three-year renewal period). **Certificates of completion of self-study courses reported must be submitted along with the application.**
- <u>Code 2</u> (formal teaching as instructor or speaker and publication of professional books or articles written) cannot exceed **20** hours per year (or **60** hours over the three-year renewal period). Repeated presentations of the same subject matter will <u>not</u> be recognized for CPE credit.
- <u>Code 3</u> (Practice Development and Management Skills, or non-accounting courses) cannot exceed **8** hours per year (or **24** hours over the prior three-year renewal period).
- **Code 4** (other CPE) this would include any CPE not indicated in codes 1-3.
- **A&A** (coded as 1-4) (minimum requirement for Accounting and Auditing is 8 hours per year (or 24 over the prior three- year period). It is mandatory that A&A courses included in codes 1-4 must <u>also</u> be listed as <u>A&A</u>. Taxation courses are not considered accounting and auditing. Please refer to regulations at <u>www.dbr.ri.gov</u>, under Board of Accountancy, Regulations Concerning Professional Conduct for clarification of mandatory CPE.

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS BOARD OF ACCOUNTANCY

1511 Pontiac Ave., #68-1 Cranston, Rhode Island 02920

APPLICATION FOR INDIVIDUAL OUT-OF-STATE PERMIT TO PRACTICE PUBLIC ACCOUNTING

For Board Use Only	
Date Rec'd	
Check No.	
Amount	
P or B LF	

	1. Full name (print) Email	
	Residence Address Phone	
	Employer Name Phone	
	Employer Address	
	Preference for mailings (check one) residence () business ()	
•	2. List all other states in which you hold or have made application for a permit/license to	o practice public accounting
	3. Have you ever had a professional or vocational license suspended or revoked by the state or foreign country? Yes () No () (If yes, please detail on separate	
	4. Are you engaged in the practice of public accounting in the State of Rhode Island?	Yes () No ()
	If so, please answer the following:	
	a. Name of practice unit	
	b. The practice unit is composed of (check one) () Certified Public Accountants () Public Accountants
	Note – Every practice unit must file a separate <i>Practice Unit Application</i> with the Bo	ard.
	I hereby certify that this practice unit doesdoes not perform engagements including, but not limited to, attest services, audits, reviews, compilation other special reports.	
	I hereby certify that I am the holder of an unrevoked and unsuspended Certificate/Au to me by the Board of Accountancy of the State of of issuance). I have never been convicted by any court of a felony or a crime involvi certify under penalty of perjury to the truth and accuracy of all statements, answers a application, including completion of the CPE courses set forth on the reverse side of	on (date ng moral turpitude. I further and representations made in this
	Signature Date	

Please send an email inquiry (boa@dbr.ri.gov) to the office of the RI Board of Accountancy to determine what the application fee would be at this current time. Fees are variable due to time frame and alphabetical groupings. Please submit all self-study certificates of completion with this license application. Course description must be submitted along with title. Lack of information will result in tabling of approval by the Board. CPE is based on calendar year, licensing is fiscal year.

PLEASE NOTE: YOU WILL NEED TO CONTACT THE STATE BOARD IN WHICH YOU HOLD A VALID LICENSE AND HAVE VERIFICATION SENT TO THE RHODE ISLAND BOARD OF ACCOUNTANCY TO CERTIFY THAT YOUR LICENSE IS CURRENT AND IN GOOD STANDING.

Please log on to www.dbr.ri.gov for CPE regulations.

Cumulative CPE Reporting It is the responsibility of each licensee to maintain CPE records as referenced in the regulations

Year	Code 1	Code 2	Code 3	Code 4	Totals	A & A	Ethics*
20							
20							
20							
Totals							

Please print and sign name:	/	

All CPE MUST BE LISTED ON THIS APPLICATION WITH CODING AND TOTALS THE BOARD WILL NOT ACCEPT ATTACHED SPREADSHEETS

Program Attendance Record - Prior three years (calendar year) Copies of this page may be added if necessary The Rhode Island Board requires a description of content of CPE as well as title of program

School, firm or organization conducting program	Title of program and description of content	CPE Code	Dates Attended	Total Hours	A & A Hours	Ethics

TOTALS:	/	/
---------	---	---

CPE Codes:

- 1. Formal self-study/correspondence courses limit of **80** hours over **3** years copies of certificates for self-study courses reported <u>must</u> be submitted with this license application. Credit will be given for **interactive and/or QAS hours only**
- 2. Formal teaching (yourself) as instructor or speaker and publication of professional books or articles limit of 60 hours over 3 years for each
- 3. Courses devoted to practice/personal development and managerial skills limit of 24 hours over 3 years
- 4. Other CPE
- A & A: Accounting and Auditing minimum of 24 hours over 3 years (not a separate code must be extracted from codes 1-4) *Ethics: not less than 6 hours of the 120 hours shall be devoted to professional ethics.

All subject matter in all codes is conditional on limitations in Practice/Personal Development and Managerial Skills Please enter the cumulative totals on the previous page or the application will be returned for completion

School, firm or organization conducting program	Title of program and short description of content	CPE Code	Dates Attended	Total Hours	A & A Hours	Ethics*

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

BOARD OF ACCOUNTANCY

1511 Pontiac Ave., #68-1 Cranston, Rhode Island 02920

Cranston, Rhode Island 02920 REQUEST FOR VERIFICATION OF LICENSURE OR CPA EXAM GRADES

Instructions for Applicant: Complete the section below indicating your full name and address of the State Board which issued your original certificate. Please mail this form to the State Board under which jurisdiction you sat for the Uniform CPA Examination. This state board will return this information directly to the State of Rhode Island.

NAME:	
NAME:(Type or print your full name, no initials	5)
TO STATE BOARD OF ACCOUNTANCY OF:	(State Board, which issued your original certificate)
STATE BOARD ADDRESS:	
Instructions for Accountancy Board Staff: Ple Island Board of Accountancy at the above address	ease complete this request for verification and return it directly to the Rhodess.
The individual noted above holds an original cert	ificate as a certified public accountant (circle) Yes No
Certificate Number	Date issued
He/she is is not currently license	ed to practice. Please note expiration date
The individual noted above passed the Uniform C	CPA Examination: (Please circle applicable number)
 Prepared and graded by the American Institute Prepared and graded by this Board Prepared by the American Institute of Cortific 	ute of Certified Public Accountants ed Public Accountants and graded by this Board
3. Prepared by the American Institute of Certification4. Other:	
Has this individual successfully completed the Al	CPA Ethics Self-Study Examination with a grade of 90% or better?
Yes	_ No

Has this individual's Certificate or Licens	e ever been suspended or revoked?
Yes	_ No
If yes, please indicate the reason:	
	State Board
0	
	y: Name
	Position
	1 doition
	Date

BOARD SEAL

RHODE ISLAND BOARD OF ACCOUNTANCY 1511 Pontiac Ave., #68-1 CRANSTON, RHODE ISLAND 02920

APPOINTMENT OF THE SECRETARY OF STATE AS AGENT OF CERTIFIED PUBLIC ACCOUNTANT

Pursuant to the provisions of Title 5, Chapter	3, of the Gei	neral Laws of Rhode Island, 1956 as amended and supportive
rules and regulations I,		of the city of,
State of	, do here	by appoint the Secretary of State for the State of Rhode
Island as my agent for the receipt of service of	f process or	pleadings in the State of Rhode Island, upon which Secretary
of State process or pleadings against me may	be served. I	do hereby consent that suits and actions may be commenced
against me in the proper court of any county in	n the State o	of Rhode Island in which the plaintiff may reside by the service
of any process or pleading authorized by the la	aws of the S	tate of Rhode Island on the Secretary of State, and I do hereby
stipulate and agree that any such service of pro-	ocess or plea	adings on the Secretary of State shall be taken and held in all
courts to be as valid and binding upon me as i	f due service	e had been made upon me personally within the State of Rhode
Island.		
The foregoing appointment, consent, stipulation	on and agree	ement shall be deemed to be and is irrevocable.
WITNESS my hand and seal this		day of
		· · · · · · · · · · · · · · · · · · ·
	-	
STATE OF } COUNTY OF }	SS:	
COUNTY OF}	SS.	
On this day of		,, personally appeared before me, a notary public
in and for said County and State,	_	
to me known to be the person described in and	d who execu	ated the foregoing instrument and acknowledged that
	executed	d such instrument as
free act and deed.		
		(Notary Public)
My commission expires:		