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Welcome

“The IPA Mentored Experience Program (MEP) provides a real opportunity for Accountants to add a practical element to their accounting skills and to establish new contacts; all of which will enhance their career prospects and contribution to the profession. The program also provides an outstanding opportunity for colleagues to increase the nature and level of their workplace co-operation; an experience which we believe will benefit all professionally and personally. I strongly commend this program. We also welcome comments from participants on how we might improve the program to make the experience and outcomes even more worthwhile.”

Andrew Conway FIPA
Chief Executive Officer
Institute of Public Accountants
The successful completion of the IPA Mentored Experience Program ("the program") is an important condition for advancement to the Member Institute of Public Accountants level of membership (MIPA).

Advancement to MIPA status also requires the successful completion of an approved postgraduate accounting qualification.

The program provides a structured approach to workplace learning and ongoing professional development and will primarily be of interest to new entrants to the profession.

More experienced members seeking advancement to MIPA may be eligible for an exemption from the requirements of the MEP.

The overriding purpose of the program is to give all participants the opportunity to work with an experienced accounting professional who will provide guidance and assistance.

The program is work experience based. It is not a formal course of study; but a support mechanism for career and professional development.

Mentoring is an effective way of assisting new entrants to the profession by allowing them to benefit directly from the experience and insight of senior qualified accountants. The key role of the mentor is to provide guidance and to act as a sounding board. This allows the mentee to ask questions, seek assistance, brainstorm, or to talk through issues when needed.

The program essentially involves a mentee completing suitable work experience and providing satisfactory documentary evidence in relation to that work experience in a number of agreed areas of work activity under the supervision of a mentor.

The program provides mentees with an opportunity to assemble evidence of professional competence and continued professional development in these agreed areas of activity. This evidence would normally be collected over a three-year period, during which time the mentee will be liaising closely with an approved mentor.

### Stages of Professional Life

The program will be of interest and relevance to recently qualified graduates. For these new entrants to the profession, the mentor mentee relationship will be characterised by guidance and counselling.

It is noted that many of our more experienced members will also seek advancement to the MIPA level of membership. It is acknowledged that the needs of more experienced members will be different to those of recently qualified graduates.

For example, more experienced members may not need guidance or counselling; but may instead be more interested in reflecting on and providing evidence of relevant work experience. It would be more appropriate for these experienced members to seek exemption from using the MEP 3 form.

Details on the nature of the information needed to support applications for exemption are provided in this outline.

### Getting Started

#### New Entrants/Graduates

**Application**

An Application form (refer MEP 1) is provided with this outline. A completed Application should be filed with your Divisional office (allows clear lines of communication). For new entrants to the profession, submission of the Application and its receipt by the IPA signals registration in the program. Note however that the three year mentor period commences upon IPA approval of the Application.

**Before meeting a Mentor**

Recently qualified graduates should reflect carefully on their career goals before meeting a mentor. Career goals are important when you take into consideration the various components of the program you wish to undertake. It is noted that these goals will change over time, and possibly during the program period.

**Choosing a Mentor**

A mentor will be a fully qualified accountant and member of a professional accounting body which is a full member of IFAC. For practical reasons, the mentor should be from your workplace. It is recognised that this will not always be possible.

If you have any queries about the suitability of a particular Mentor, please direct your enquiry to Member Knowledge at Head Office.

The mentor should have a number of key characteristics:

- experience in people management and/or mentoring;
- be accessible and be able to commit the time required;
- a strong communicator;
- a demonstrated ability to maintain confidences; and
- be willing to assist openly and honestly.
The Process

New Entrants/Graduates

Meetings
All meetings should be focussed upon information sharing and performance improvement in the agreed activity areas.

The initial meeting
This first meeting must be face-to-face. Meetings would normally take between one and two hours. At this first meeting you would be likely to:
• Formalise the mentor-mentee relationship in a Statement of Commitment (refer Form MEP 2).
• Discuss a development program based on the agreed areas of activity and work experiences for the coming year. It is expected that over the three year mentor period, the mentee will demonstrate development in the agreed areas of activity, supported by workplace evidence. The skills chosen should allow for professional and personal development under the guidance of the mentor.
• Complete a Work Plan (refer Form MEP 4) which lists agreed activity areas.
• Record all meeting details including the time, date, topics and outcomes in a Meeting Log (refer Form MEP 5). The form should be retained for submission as evidence.

Ongoing meetings
It is recommended that no fewer than six mentor meetings are conducted annually.

Meetings may be face-to-face, telephone or electronic.
At these meetings the mentor would be most likely to:
• document progress towards your goals;
• review evidence of skills development; and
• confirm the validity of workplace evidence by questioning the mentee and meeting with supervisor(s) and colleagues etc.
The mentor must ensure that all evidence provided is both valid and sufficient.

Annual review
Each annual review meeting should be face-to-face, at which time the mentor and mentee would:
• discuss progress, with the mentor being satisfied that the mentee has achieved competency and demonstrated development in the agreed areas of activity, and
• discuss and agree career goals and skills development areas for the next year.
The mentee should maintain records of all meetings as workplace evidence; viz: details of time, date, topics and outcomes in a Meeting Log (see Form MEP 5).
When satisfied that the mentee has achieved competency in an agreed area of activity, the mentor should complete a Mentor’s Verification (see Form MEP 9).

For graduates taking part in the program the overriding objective is the provision of workplace evidence which demonstrates professional development in the agreed areas of activity throughout the program term.

Evidence
The detailed evidence which would support mentee claims to competency would include but be not limited to:
• detailed statements or other testimonials from a supervisor, manager, clients (also see next section);
• file notes;
• meeting notes;
• copies of reports, including proposals, recommendations or analysis, noting that there is no expectation that information of a confidential or proprietary nature is provided;
• job descriptions;
• workplace policies and procedures;
• performance reviews;
• examples of completed work; and
• certificates of attendance and other evidence of relevant training or professional development programs.

Given the considerable variety of tasks, work roles, responsibilities and experiences possible within the profession generally, it is neither possible nor useful to attempt to present a list of evidence which purports to be comprehensive. If there is doubt about the relevance or appropriacy of evidence or work experiences, this should be considered and agreed with your mentor.

Testimonials
Where a mentee provides other testimonials, the mentor should confirm the validity of the evidence and complete Form MEP 6 Third Party Evidence of Skill Acquired.

Change of Mentor
Please note that credits toward the competency of the mentee must be based on the experience of the mentee whilst under the supervision of a mentor. In those instances where there has been a change of mentor, all evidence collected and provided to any and all previous mentors would also need to be tabled.
The Process –

For Experienced Professionals

Application
An Application form (refer MEP 1) is provided with this outline. A completed Application should be filed with either your Divisional Office at the address noted. Submission of the Application and its receipt by the IPA signals registration in the program. Note however that the three year mentor period commences upon IPA approval of the Application.

The program provides meaningful structured learning and development opportunities for new entrants to the accounting profession.

Whilst workplace competence may be measured at a point in time, it is developed throughout a career, and it would be both unreasonable and unwise to dismiss prior work experience; mentored or otherwise, when considering the suitability of members for advancement to MIPA level.

Accordingly those members who bring to the program recent relevant accounting and finance sector work experience (for example within the past five years) may satisfy the requirements of this program, wholly or partly, by providing suitable evidence of competency.

This evidence would be based on third party testimonials in relation to the relevant areas of activity. The third party would have a strong and demonstrated working relationship with the mentee, and be able to reliably attest to the mentee’s capacity to complete the activities.

The third party would be required to provide an independent testimonial and supporting evidence in relation to competence in the nominated areas of activity. Where a working relationship is unclear or where the mentor/mentee relationship cannot be established to the satisfaction of the IPA, this attestation would not be accepted as evidence of competence and an exemption would therefore not normally be granted.

Application for Exemption
Experienced members wishing to gain a Full or Partial Exemption from the MEP should fill out MEP 3 Exemption Application Form and attach all relevant supporting documentation.

Experienced Professionals who have been working in the accounting and finance sector for a number of years and have gained considerable practical accounting experience may be eligible for an exemption from the MEP requirements. The submission of evidence which is considered satisfactory; i.e. in the opinion of the IPA it reasonably demonstrates the competence and experience of the member in the nominated areas of activity, will result in the member receiving an exemption from all or part of the program.

Where a third party is not available, such as may be the case in single employee work places, prior work place experience would normally not be accepted as grounds for the approval of an application for an exemption from the program.

There is however, provision for relief in these cases, and affected members are encouraged to contact the Institute of Public Accountants to discuss their circumstances.
Evidence
Where the requirements of the program are to be demonstrated with reference to prior period work experience, the following details would be the minimum expected in relation to each role:

- job title,
- length of time in the role, and
- details of duties and responsibilities.
Detailed evidence included in third party testimonial would include but be not limited to:

- statements or other testimonials from a supervisor, manager, clients;
- job description(s);
- performance reviews;
- examples of completed work, and
- certificates of attendance and other evidence of relevant training or professional development programs.

Participants seeking either full or part exemption from the program will be required to provide a detailed resume of up to 6 pages including:

- qualifications
- professional memberships and attainments
- job descriptions
- other relevant material

The following evidence would also satisfy claims of applicant competency and in so doing meet the requirements of the program:

- completion of a mentor program or its equivalent with CPA Australia, CA Australia or any other professional body approved by the IPA;
- evidence of the member having occupied the position of partner in a public practice for a period of not less than five of the last ten years.

For experienced professionals the overriding objective is to recognise their workplace contributions and competence. This will occur following the provision of independent third party testimonials which demonstrate professional development in the agreed areas of activity. This may result in the member being exempted from all or part of program requirements.

Testimonials
Where a mentor cites other testimonials, the mentor should confirm the validity of the evidence and complete Form MEP 6 Third Party Evidence of Skill Acquired.

Change of mentor
It is important for both parties to understand they are entering a voluntary relationship that is intended to be mutually beneficial. However, each retains the right to discontinue the mentoring process at any time. If this occurs, the mentee is responsible for seeking another mentor and must complete the Change of Mentor Application (refer MEP Form 7).

In such instances it is expected that the outgoing mentor will certify the relevant documentation and provide adequate notes for the program to continue as seamlessly as possible.

The new mentor is encouraged to review any documentation already signed off.

Please note that credits toward the competency of the mentee must be based on the experience of the mentee whilst under the supervision of a mentor. In those instances where there has been a change of mentor, all evidence collected and provided to any and all previous mentors would also need to be tabled.

Withdrawal from or deferral of the program
If a mentee’s circumstances change to the extent that they can no longer participate, they should inform their mentor and complete a Notification of Withdrawal (refer MEP Form 8) as soon as possible.

A further option may be that of deferral. Deferral may be sought at any time, however, mentees should ensure that their program documentation is current so they may continue when circumstances allow. This will ensure that all to date mentored experience is recognised on recommencement.
Completion of the Program

When the mentor is satisfied that:
(a) the mentee has demonstrated, under their supervision, competency in the agreed areas of activity; or
(b) that the work place experience of the mentee in the preceding five year period demonstrates the mentee’s competency in the agreed areas of activity, then the mentor should complete a Certificate of Attainment (refer MEP Form 10).

This form should be forwarded to the IPA Head Office, at which time a certificate of program completion will be issued.

Provision is also made for participants to recommend changes or improvements to the program. Form MEP 11 System Improvement provides an opportunity for all mentees and mentors to make this feedback available to the IPA.

Program Controls

Upon advancement to MIPA status, a prescribed number of members will be asked to provide further information about their program experience; including evidence of mentor meetings, completed forms and evidence of competency. This request may be made at any time up to three years after advancement to MIPA level membership.

The Program Paperwork

There are a number of forms that support the program, required for administrative purposes and verification, and to assist the Mentee’s personal development.

1. **Application**
   - To make application

2. **Statement of Commitment**
   - To formalise the relationship between the Mentor and the Mentee. Completed at the initial meeting

3. **Exemption Application**
   - For members seeking full or part exemption based on prior period work experience

4. **Work Plan**
   - Agreed activity or activities to be assessed

5. **Meeting Log**
   - Notes of meetings between mentor and mentee

6. **Third Party Evidence of Skill Acquired**
   - Completed by mentees to collect evidence of achievement from managers/senior staff

7. **Change of Mentor**
   - Application for a change of mentor during the program

8. **Notification of Withdrawal**
   - Advice from mentee of withdrawal

9. **Mentor’s Verification**
   - To verify that the mentee has gained the skills required

10. **Certification of Attainment**
    - Confirmation by the Mentor of completion. To be submitted for membership upgrade purposes

11. **System Improvement**
    - Suggested improvements
For further information on the IPA Mentored Experience Program please contact your nearest Divisional Office on 1800 625 625. Overseas members should contact their local country representative or contact our Head Office at:

Level 6, 555 Lonsdale Street, Melbourne Victoria 3000, Australia
GPO Box 1637, Melbourne Victoria 3001, Australia
+61 3 8665 3100
+61 3 8665 3130
headoffice@publicaccountants.org.au
www.publicaccountants.org.au

Confidentiality

It is essential that both the mentor and mentee maintain confidentiality and, in particular, respect the rights and privacy of their employer(s). Both parties are required to commit to the Privacy provisions of the program, and the mentee is expected to take all reasonable steps to advise their employer about the program.

Further Program Information

The following guidelines apply to all persons working in the accounting and financial services sector.

The broad accounting skill or activity areas noted should be considered for their relevance to the mentee’s working life, including future career plans.

Where activity areas are relevant to a mentee’s work place, the mentee and mentor should agree a plan that will demonstrate skill enhancement in the areas of activity.

It is expected that mentees will provide evidence in relation to competency in each of the following fundamental or core activities:

A Industry capability and knowledge
B Financial reporting

It is also expected that mentees will provide evidence in relation to competency in at least one other activity area drawn from the following:

C Management Accounting
D Internal Control, Audit and Governance
E Strategic Management Issues
F Financial Management
G Taxation
H Insolvency and Reconstruction
I Financial Planning

Standards

The primary objective of the program is to ensure that all members seeking advancement are given a framework within which peer based observation and advice can be completed over a period of sufficient duration to allow the mentor to form an opinion on the work place competency and development of the mentee.

Differences in workplace responsibilities and experiences mean it is not possible to mandate tasks to be completed to allow a mentor to confirm competency.

Accordingly, when evaluating the competency of a mentee in an area of activity, the mentor need only be satisfied and offer comments in relation to demonstrated competence and evidence in a reasonable majority of the tasks noted within the agreed area of activity.

The IPA recognises that mentees working in an academic environment are unlikely to be able to provide evidence in relation to many of the practical components of the program. For such mentees, it is expected that the relevant skills in each area of activity will be demonstrated in the course of academic work through the development of appropriate teaching, learning and research tasks and activities and the presentation of relevant evidence in support of this work.

Program Areas of Activity

Differences in workplace responsibilities and experiences mean it is not possible to mandate tasks to be completed to allow a mentor to confirm competency.
Core Areas of Activity

A. Industry Capability and Knowledge
It is expected that all mentees will demonstrate or otherwise provide evidence of:
• an awareness of the political, economic, social and cultural environment in which their entity operates; including an understanding of the needs of stakeholders such as community and environmental groups; and
• the ability to monitor and act on risks posed by laws, regulations and conventions; including trades practices legislation, competition law, industrial relations legislation and privacy legislation.

B. Financial Reporting
It is expected that all mentees will demonstrate or otherwise provide evidence of:
• an understanding of the regulatory environment; particularly how it impacts on the financial reporting obligations of the entity. This may include an assessment of reporting requirements for a specific reporting period or a discussion of the application and interpretation of relevant accounting standards;
• their preparation of financial statements required by law or at stakeholder request; including an income statement, balance sheet, statement of cash flows and – where relevant – a statement of changes in owners equity;
• their preparation of financial reports that conform to requirements for internal financial analysis; including statistics such as financial ratios or specific performance indicators;
• their assessment of long and short term financial requirements applying relevant tools and techniques for analysis; including budgets and relevant commentary; and
• the ability to clearly communicate complex financial reporting concepts using a range of presentation techniques.

C. Management Accounting
It is expected that mentees will demonstrate or otherwise provide evidence of:
• the preparation of a range of budget schedules; including sales, purchases and Cash Flow Budgets;
• the preparation of performance reports tailored to the demands of the entity; including relevant job profitability summaries, reports featuring variable and fixed costing and cost-volume-profit analysis;
• their ability to apply a range of costing techniques to provide data for senior managers and directors; which may include costing schedules or events budgets; and
• an ability to communicate management accounting information clearly to all stakeholders using a range of presentation techniques.

D. Internal Control, Auditing and Governance
It is expected that mentees will demonstrate or otherwise provide evidence of:
• an ability to assess the suitability of internal controls within an entity and to review internal control procedures to ensure they remain effective;
• the ability to develop internal control policies that provide assurances to stakeholders in relation to the integrity of the financial reporting system; including the maintenance of compliant financial delegation accountabilities, explanations of transaction cycles, internal control objectives, control risks and primary internal controls for a range of transactions, including cash, payroll and inventory;
• the ability to document internal control procedures and evaluate performance indicators for compliance; including ensuring the entity is prepared to change procedures where weaknesses in internal control have been identified;
• the development and execution of audit plans in accordance with relevant standards; including those prescribing the conduct of external audits and related ethical pronouncements;
• the evaluation and coordination of standards and processes for corporate governance adherence, including internal control procedures, IT systems, management processes and project management timelines; and
• an ability to clearly communicate with relevant stakeholders in relation to audit, internal control and governance.
E. Strategic Management Issues
It is expected that mentees will demonstrate or otherwise provide evidence of:
• completed strategic management plans and organisational improvement programs;
• the use of standard financial techniques and analytical tools to assess the impact of revenue, cost and operational changes, process analysis and benchmarking;
• the ability to apply analytical methods such as SWOT analysis;
• their assessments of financing and resourcing options, including the use of portfolio management techniques; and
• the use of standard accounting techniques to identify organisational resourcing requirements, including discounted cash flow, rates of return and/or payback periods.

F. Financial Management
It is expected that mentees will demonstrate or otherwise provide evidence of:
• the preparation of advice upon and the execution of an appropriate financing strategy or strategies for the entity;
• the establishment of appropriate treasury policies, including the development of suitable internal control procedures and portfolio management techniques;
• an understanding of the taxation consequences of financing arrangements and management of the entity’s tax compliance strategies;
• an understanding of the application of accounting principles that impact upon the treasury function, including accounting standards for the recognition, measurement, presentation and disclosure of financial instruments;
• the application of appropriate qualitative techniques such as discounted cash flows, return on investment or price earnings ratios to analyse financial position, evaluate projects and identify resources; and
• effectively communicating the consequences of particular financing arrangements to all stakeholders.

G. Taxation
It is expected that mentees will demonstrate or otherwise provide evidence of:
• a working knowledge of the taxation system and laws in Australia, including the preparation of appropriate tax strategies for the entity;
• an ability to determine assessable income and allowable deductions for individuals and businesses, including the identification of accrued or prepaid income and expenditure and the calculation of taxable income;
• advice that includes clear statements of the impact of an income tax regime on an entity or individual’s income; and
• the ability to explain complex concepts to a range of stakeholders using various presentation styles.

H. Insolvency and Reconstruction
It is expected that mentees will demonstrate or otherwise provide evidence of:
• the ability to research and apply relevant principles of legislation and case law, including relevant written reports;
• the ability to conduct an effective administration of an insolvent entity which may include the identification and securing of missing assets, determine the potential returns from assets and claims to creditors and the establishment of meaningful timelines and objectives for the completion of the insolvency; and
• the ability to exercise judgment and demonstrate strategic reasoning when presenting advice and solutions to clients and other parties, including reports to various parties that describe potential options available in insolvency.

I. Financial Planning
It is expected that the mentee will demonstrate or otherwise provide evidence of:
• a working knowledge of the financial advice laws in Australia, in particular the Corporations Act and the Future of Financial Advice reform measures;
• the ability to identify and analyse a client’s objectives, needs and financial situation;
• the ability to develop appropriate strategies and solutions for clients and present these to the client; and
• negotiate and implement a financial plan with the clients; and
• complete and maintain necessary documentation.
Mentored Experience Program
Application Form

Please complete the Application Form and return to:

Mentored Experience Program Coordinator
Institute of Public Accountants
GPO Box 1637
Melbourne VIC 3001
Australia
f +61 3 8665 3130

For further terms and conditions of the Mentored Experience Program please visit
www.publicaccountants.org.au/MEP
Section 1: Personal Details (Mentee)  Please complete and submit this form to register for the Mentored Experience Program (MEP).

☐ Miss ☐ Mrs ☐ Ms ☐ Mr ☐ Other, please state________, IPA member ID ____________________________

Last name ____________________________ First name(s) ____________________________

Name of employer ____________________________

Job title ____________________________

Employer's business address ____________________________

Phone ____________________________ Email address __________________________

Registration Statement:

I hereby declare that I wish to register for the Mentored Experience Program and that I understand and accept the privacy statement and general terms and conditions available at www.publicaccountants.org.au

Signature: ____________________________ Date: ____________________________

Section 2: Mentor Details  This section should be completed by your Mentor

☐ Miss ☐ Mrs ☐ Ms ☐ Mr ☐ Other, please state________, IPA member ID ____________________________

Last name ____________________________ First name(s) ____________________________

Name of employer ____________________________

Job title ____________________________

Employer’s business address ____________________________

Private address: ____________________________ Email address __________________________

Are you a member of the IPA?

☐ Yes / IPA Member Number ____________________________

☐ No (Please indicate the relevant professional body of which you are a full voting member)

Relevant professional body membership (please tick)

☐ American Institute of Certified Public Accountants

☐ Association of Chartered Certified Accountants (UK)

☐ Canadian Institute of Chartered Accountants

☐ Chartered Institute of Management Accountants (UK)

☐ Chartered Institute of Public Finance and Accountability (UK)

☐ Conseil Supérieur de l’Ordre des Experts Comptables

☐ CPA Australia

☐ Hong Kong Institute of Certified Public Accountants

☐ Other [subject to IPA approval – please provide details] ____________________________

Member number of the equivalent member body you belong to ____________________________

Mentor Statement

I hereby declare that I agree to act as a Mentor for the applicant under the conditions of the IPA’s Mentored Experience Program. I have also read the Privacy Statement and General Terms and Conditions available at www.publicaccountants.org.au

Signature: ____________________________ Date: ____________________________

Contact Details

Freecall (from within Australia) 1800 625 625. Please direct all enquiries regarding this application to your Divisional Office as listed below:

ACT/NSW: Locked Bag A6090, Sydney South NSW 1235  QLD: GPO Box 2578, Brisbane QLD 4001  SA/NT: PO Box 3056 Rundle Mall, Adelaide SA 5000  TAS: GPO Box 244, Hobart TAS 7001  VIC: GPO Box 1637, Melbourne VIC 3001  WA: Locked Bag 9, South Perth WA 6951

Outside Australia direct enquiries by email to: headoffice@publicaccountants.org.au or by post to GPO Box 1637, Melbourne VIC 3001

FOR MEM034 V3_JUL13
This form is to be used to formalise the relationship between the mentor and the mentee. This form must be retained by the mentee.

Mentee name ____________________________________________

IPA member ID __________________________________________

Statement of commitment between Mentee and the Mentor

1. The mentor and the mentee agree to conform to the aim of the Institute of Public Accountants' Mentored Experience Program and enter into a professional arrangement to work together to the benefit of the mentee.

2. The mentor will endeavour to work with the mentee in his or her acquisition of stated competencies to fulfil MIPA status requirements by:
   - Providing guidance, direction and advice to the mentee, and assisting with devising career development strategies to acquire professional skills and experience.
   - Verifying the validity of the evidence provided by the mentee.

3. The mentor and the mentee will respect the relevant employer’s confidentiality and privacy rights during the mentoring process.

4. The mentee will maintain detailed records of meetings with the mentor and complete records of evidence to support the validity of the process of acquisition of competency.

5. Mentoring will commence from the date noted below.

6. The mentor and mentee agree that during the course of the term they may become acquainted with or have access to confidential information of the other party and agree to maintain the confidentiality of that information both during and after the term.

7. All information disclosed during the mentoring process by the mentor and mentee will be confidential and disclosed only for the purpose of developing evidence to assist the IPA to upgrade Associates to Member status and for satisfying an audit requested by the IPA.

8. This agreement is valid for the term of the mentoring agreement as agreed by both parties.

Name of mentor

_________________________________________________________________

Name of mentee

_________________________________________________________________

Signature of mentor

_________________________________________________________________

Signature of mentee

_________________________________________________________________

Date

_________________________________________________________________

Date

_________________________________________________________________

Contact Details
Freecall (from within Australia): 1800 625 625. Please direct all enquiries regarding this application to your Divisional Office as listed below:

ACT/NSW: Locked Bag A6090, Sydney South NSW 1235
QLD: GPO Box 2578, Brisbane QLD 4001
SA/NT: PO Box 3056 Rundle Mall, Adelaide SA 5000
TAS: GPO Box 244, Hobart TAS 7001
VIC: GPO Box 1637, Melbourne VIC 3001
WA: Locked Bag 9, South Perth WA 6951

Outside Australia direct enquiries by email to: headoffice@publicaccountants.org.au or by post to GPO Box 1637, Melbourne VIC 3001
Please complete this form if you wish to apply for a part or full exemption from the IPA Mentored Experience Program. Please attach relevant documentation and return to the IPA. Your application will then be assessed and you will be advised in writing of any exemption entitlement. Allow up to four weeks for processing.

Supporting Documentation

Evidence

Participants seeking either full or part exemption from the program will be required to provide a detailed resume of up to 6 pages. Where the requirements of the program are to be demonstrated with reference to prior period work experience, the following details would be the minimum expected in relation to each role:

- job title;
- length of time in the role, and
- details of duties and responsibilities

Detailed evidence included in third party testimonial would include but be not limited to:

- statements or other testimonials from a supervisor, manager, clients;
- job description(s);
- performance reviews;
- examples of completed work; and
- certificates of attendance and other evidence of relevant training or professional development programs.

The following evidence would also satisfy claims of applicant competency and in so doing meet the requirements of the program:

- completion of a mentor program or its equivalent with CPA Australia, CA Australia or any other professional body approved by the IPA; and
- evidence of the member having occupied the position of partner in a public practice for a period of no less than 5 years of the last 10.
Application Details

- Miss, Mrs, Ms, Mr, Other, please state __________
- Full name _____________________________________________________________________________
- Name of employer _______________________________________________________________________
- Job title _______________________________________________________________________________
- Phone _________________________________________________________________________________
- Email address __________________________________________________________________________

Reason for Application (please tick)

- Enrolment in another professional/mentor program
  - Have you completed a Mentor Program with CPA Australia, ICAA or another IFAC recognised professional accounting body?
    - Name of body _______________________________________________________________________
    - Date __ / __ / ______
  - Have you been exempted from the Mentor Program by CPA Australia, ICAA or another IFAC recognised professional Accounting body?
    - Name of body _______________________________________________________________________
    - Date __ / __ / ______
  - NB In some circumstances Mentorships taken with non Accounting professional bodies may also be acceptable as evidence

- Are you currently enrolled in a Mentor Program with CPA Australia, ICAA or another IFAC recognised professional accounting body?
  - Name of body _______________________________________________________________________
  - Date program commenced __ / __ / ______

Relevant Work Experience

- Do you have more than ten years practical experience in a senior accounting role?
  - Yes __ No __
- Was this experience attained whilst working full time?
  - Yes __ No __
- Was the experience in the areas of accounting and/or finance and/or business advice?
  - Yes __ No __
- Have you been a principal or partner in a Public Practice Accounting firm for more than five years?
  - Yes __ No __
- Do you supervise any staff or contractors? If so, how many of those staff/contractors undertake accounting roles?
  ______________________________________________________________________________________

Other Reason

- Do you have another reason for seeking exemption from the program?
  - Yes __ No __
  ______________________________________________________________________________________

Supporting Documentation

If you have answered yes to any of the above you may be eligible for a part or full exemption. You will need to provide a copy of your resumé and other relevant documentation to support your application. For details of the type of documentation you need to provide please see overleaf.

Statement of Understanding and Declaration

I hereby declare that I wish to apply for an exemption from the IPA Mentored Experience Program and that the information contained in this application is true and correct. I have attached the relevant documentation to this form. I have read the Privacy Statement and General Terms and Conditions available at www.publicaccountants.org.au

Signature ________________________________________________________________________________
Date _____________________________________________________________________________________

Submit this form by post or fax to: Mentored Experience Program Coordinator, Institute of Public Accountants
GPO Box 1637, Melbourne VIC 3001, Australia +61 3 8665 3130

Contact Details
Freecall (from within Australia) 1800 625 625. Please direct all enquiries regarding this application to your Divisional Office as listed below:

- ACT/NSW: Locked Bag A6090, Sydney South NSW 1235
- QLD: GPO Box 2578, Brisbane QLD 4001
- SA/NT: PO Box 3056 Rundle Mall, Adelaide SA 5000
- TAS: GPO Box 244, Hobart TAS 7001
- VIC: GPO Box 1637, Melbourne VIC 3001
- WA: Locked Bag 9, South Perth WA 6951

Outside Australia direct enquiries by email to: headoffice@publicaccountants.org.au or by post to GPO Box 1637, Melbourne VIC 3001
Use this form to document the agreed activities to be assessed and their agreed completion date. This form should be retained by the mentee.

<table>
<thead>
<tr>
<th>Mentee name</th>
<th>IPA member ID</th>
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<tbody>
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</table>

Year

<table>
<thead>
<tr>
<th>Area of Activity</th>
<th>Description</th>
<th>Planned Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Preparation required

_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________  

Skill development activities

_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________  

Mentor’s signature

Date:

Mentee’s signature

Date:
This form should record details of meetings between mentee and mentor. This form should be retained by the mentee.

Mentee name ___________________________________________ IPA member ID ________________________________________

Date __________________________________________________________________________________________ Location __________________________________________

Format [meeting/email/telephone] ________________________________________________________________

Matters addressed
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________

Actions or outcomes
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
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_____________________________________________________________________________________________________________________________________

Actions completed from previous meeting(s)
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________

Contact Details
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Outside Australia direct enquiries by email to: headoffice@publicaccountants.org.au or by post to GPO Box 1637, Melbourne VIC 3001
This form should be used by mentees to document evidence of the mentee’s achievements provided by senior staff in their place of employment.

<table>
<thead>
<tr>
<th>Mentee</th>
<th>IPA member ID</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of manager or senior staff member</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Company name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address</th>
</tr>
</thead>
</table>

**Unit of Competency/Elements(s) of Unit of Competency**

The IPA is seeking evidence that the mentee has demonstrated competence in the following unit of competency.

<table>
<thead>
<tr>
<th>Activity</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Evidence</th>
</tr>
</thead>
</table>

Can the IPA contact you to confirm these details is required?  
☐ Yes  ☐ No

<table>
<thead>
<tr>
<th>Contact telephone number</th>
<th>Email address</th>
</tr>
</thead>
</table>

Describe the working relationship between you and the mentee ________________________________

**Third Party Statement**

PROTECTION OF YOUR INFORMATION: The Institute of Public Accountants (IPA) is committed to protecting your privacy and the confidentiality of the information we maintain. As part of the MEP, the IPA is required to collect personal information from you. You may refuse to provide such information, however this is likely to result in your non compliance with the program. The information collected may be used for analysis and review to assist the IPA in providing member services, benefits and communications. As a professional association the IPA is obligated to provide information from time to time to various statutory and government bodies. The provision of such information is on a strictly confidential basis. For more information on the IPA privacy policy, visit [www.publicaccountants.org.au](http://www.publicaccountants.org.au)

I hereby declare that I have read the privacy statement and terms below.

**Mentor’s signature** __________________________  Date __________________________

**Mentee’s signature** __________________________  Date __________________________

Terms: It is an express term of agreeing to participate in the IPA Mentored Experience Program that neither the IPA nor its Directors, Officers or employees shall be liable for any loss or damage arising out of participation no matter how caused including consequential loss. The IPA does not warrant that the MEP is suitable as a method of instruction.
### Section 1: Mentee's Details

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPA member ID</td>
<td></td>
</tr>
<tr>
<td>Full name</td>
<td></td>
</tr>
<tr>
<td>Name of employer</td>
<td></td>
</tr>
<tr>
<td>Job title</td>
<td></td>
</tr>
<tr>
<td>Phone</td>
<td></td>
</tr>
<tr>
<td>Email address</td>
<td></td>
</tr>
</tbody>
</table>

**Change of Mentor Statement**

I hereby declare that it is my wish to conclude my mentoring arrangement with my previous mentor (see Section 2). Details of my new mentor are included below.

I have read and accept the privacy statement, general conditions and limitations pertaining to the MEP.

Mentor's signature: __________________________ Date: __________________________

### Section 2: Previous Mentor Details

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mentor's name</td>
<td></td>
</tr>
<tr>
<td>Mentor's IPA member ID</td>
<td></td>
</tr>
<tr>
<td>Period during which mentoring took place</td>
<td>to</td>
</tr>
</tbody>
</table>

**Mentor Statement**

I have signed off on all documentary evidence for the duration of my mentoring.

Mentor's signature: __________________________ Date: __________________________

### Section 3: New Mentor Details

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full name</td>
<td></td>
</tr>
<tr>
<td>Name of employer</td>
<td></td>
</tr>
<tr>
<td>Job title</td>
<td></td>
</tr>
<tr>
<td>Phone</td>
<td></td>
</tr>
<tr>
<td>Email address</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
</tbody>
</table>

**Mentor Statement**

I hereby declare that I agree to act as mentor under the conditions of the IPA's Mentored Experience Program. I have read and accept the privacy statement, general conditions and limitations pertaining to the MEP and included with the MEP Information Package.

Mentor's signature: __________________________ Date: __________________________

---

**Contact Details**

Freecall (from within Australia): 1800 625 625. Please direct all enquiries regarding this application to your Divisional Office as listed below:

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Outside Australia direct enquiries by email to: headoffice@publicaccountants.org.au or by post to GPO Box 1637, Melbourne VIC 3001.
Please submit this form to the IPA if you wish to withdraw from the Mentored Experience Program.

Mentee’s Details

IPA member ID

Full name

Name of employer

Job title

Phone Phone number

Email address

I wish to withdraw from the Mentored Experience Program (Please provide a brief reason)

_____________________________________________________________________________________________________________________________________

_____________________________________________________________________________________________________________________________________

_____________________________________________________________________________________________________________________________________

_____________________________________________________________________________________________________________________________________

_____________________________________________________________________________________________________________________________________

I confirm that I have:

1. Notified my mentor of my intention to withdraw.

2. Ensured that my mentor has signed all the Mentored Experience Program documentation.

Signature

Date

Complete and submit this form by post or fax to:
Mentored Experience Program Coordinator Institute of Public Accountants
GPO Box 1637, Melbourne VIC 3001, Australia  f +61 3 8665 3130
This form must be completed by the Mentor. This form should be retained by the mentee. Please complete a separate form for each activity area.

Mentor’s Signature: ____________________________________________ Date: __________________________

Mentee’s Signature: ____________________________________________ Date: __________________________

Mentor’s Comments:
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________

<table>
<thead>
<tr>
<th>Activity Area</th>
<th>Documented Evidence Produced</th>
<th>Specific Work Task Accomplished</th>
</tr>
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<tbody>
<tr>
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Other Evidence (please list all)

|               |                              |                                |
|               |                              |                                |
|               |                              |                                |

IPA Mentor Confirmation

Evidence provided is: \[\]
- [ ] Valid
- [ ] Authentic
- [ ] Sufficient

Mentor’s Signature: ____________________________________________ Date: __________________________

Mentor’s Comments:
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
This form should be used to record the completion of each activity. Once all agreed activities are completed the form should be sent to the IPA.

This is to certify that

<table>
<thead>
<tr>
<th>Mentee</th>
<th>IPA member ID</th>
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has satisfactorily completed the IPA’s Mentored Experience Program and has provided documentary evidence to confirm the acquisition of the following core units of work competency.

<table>
<thead>
<tr>
<th>Area of Activity</th>
<th>Date completed</th>
<th>Name of Mentor</th>
<th>Signature of Mentor</th>
<th>Signature of Mentee</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Core Activities</strong></td>
<td>It is expected that all mentees will provide evidence in relation to competency in each of the following fundamental or core activities.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>A</td>
<td>Industry capability and knowledge</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>Financial reporting</td>
<td></td>
<td></td>
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<tr>
<td><strong>Optional Activities</strong></td>
<td>It is expected that all mentees will provide documentary evidence confirming the acquisition of at least one of the following optional units of work competency.</td>
<td></td>
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<td></td>
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<tr>
<td>C</td>
<td>Management accounting</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>D</td>
<td>Internal control, audit and governance</td>
<td></td>
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<td></td>
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<tr>
<td>E</td>
<td>Strategic Management Issues</td>
<td></td>
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<tr>
<td>F</td>
<td>Financial Management</td>
<td></td>
<td></td>
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<tr>
<td>G</td>
<td>Taxation</td>
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<td>H</td>
<td>Insolvency and reconstruction</td>
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<tr>
<td>I</td>
<td>Financial Planning</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Complete and submit this form by post or fax to:
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GPO Box 1637, Melbourne VIC 3001, Australia  f +61 3 8665 3130

Contact Details
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Outside Australia direct enquiries by email to: headoffice@publicaccountants.org.au or by post to GPO Box 1637, Melbourne VIC 3001
This form is to be used to report suggested improvements to the Mentored Experience Program.

Mentee ______________________________________ IPA member ID ______________________________________

Details of Proposed Improvements(s)
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________

Please find attached any additional information necessary.

Signature ______________________________________ Date ______________________________________

IPA Office Use Only
Recommended action with regard to the proposed improvements(s) ______________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________

Action to be taken ______________________________________________________________________________
_____________________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________________

Complete and submit this form by post or fax to:
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GPO Box 1637, Melbourne VIC 3001, Australia  f +61 3 8665 3130