

Note: Please complete ALL sections in this application.

Your personal and business details				
☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other, please	state Gender: Male Female			
Given name Middle name	Family name			
Preferred name Previous n	ame (if changed)			
Your name for the membership certificate (e.g. John I	David Smith)			
Date of birth / (mandatory, dd/mm/yyyy)				
Your business entity				
Registered business name				
ABN	ACN			
Website				
Your interest in the business:				
☐ Sole trader ☐ Partner ☐ Principal ☐ Director	☐ Shareholder ☐ Other:			
→ Commencement date/(cc	mpulsory)			
Number of staff: ☐ 1 ☐ 2-5 ☐ 6-10 ☐ 11-2	0 🗌 21-30 🗎 31-50 🗎 51+			
Number of clients: ☐ 1-50 ☐ 51-100 ☐ 101-20	00 🗆 201-300 🗆 301-500 🗆 501+			
Contact details				
Home address	Principal place of business			
Postal address	Postal address			
Suburb/Town/City	Suburb/Town/City			
State/Territory Postcode	State/Territory Postcode			
Home phone	Business phone			
Mobile	Business fax			
Home email	Business email			
Preferred mailing address:				
☐ Home address ☐ Home postal address ☐ Principal place of business ☐ Business postal address				
Preferred email: Home Business				

В	More information	about you				
	Have you ceased to be a member of a professional body due to disciplinary action? Yes No)	
	Have you ever been refused admission to the IPA or any other professional body? Yes No Have you ever had any criminal convictions within or outside Australia? Yes No Have you been the subject of an unfavourable decision by a professional or regulatory body? Yes No					
					es 🗆 No	
	Have you ever been de	clared bankrupt or insc	olvent?	□ No		
	Note: If you answered official documentation		n(s), please pro	vide details on	a separate page with	any related
<u>c)</u>	Membership of Int	Membership ID	Country	Admission date		Membership paid to
	e.g: CA ANZ	12345	Australia	28/01/2009) CA	30/06/2020
ifac/ (Au: If th app	e: Please check if your moderness in Please check if your moderness in Please check if your moderness is stralia), ICB and Australia is is your admission ballication (e.g. membershot standing). Tax Practitioners I	ganizations-and-countrilian Bookkeepers Assassis, please provide daip certificate and cur	y-profiles. Note sociation are n ocumentary ever membersh agent regist	that ATMA, NT ot IFAC bodies idence of you ip renewal tax tration(s) an	TAA, Tax Institute, AA c current membership invoice receipt, or a	T with this letter of
	Individual BAS agent registration number Expiry date / /					
	Company/Partnership B Qualifications Please include details award certificate(s) an	s of fully completed r	elevant qualifi	cations below		
	Qualification	Major	Instit	ution	Location & country	Date completed*
	e.g: Bachelor of Commer	rce Accounting	Universit	y of NSW	Sydney, Australia	22/10/2011
—		<u> </u>				

^{*}The date when all requirements were completed and you became eligible to receive an award.

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Professional work experience in accountancy and related fields

From	То	Position title	FT, PT or Casual	Employer name
e.g. 08/06/2012	Current	Partner	FT	Accounting for you
Responsibilities	Tax returns for individual, partnership, or company. Supervising two Accountants.			
Responsibilities				
Responsibilities				
Responsibilities				
Responsibilities				
Responsibilities				
Responsibilities				

	Please indicate the services you offer to the public: ☐ BAS services prescribed by the <i>Tax Agent Services Act 2009</i> or the Tax Practitioners Board¹			
	☐ Payroll	☐ Software customisation and training		
	Bookkeeping	☐ Other² (provide details)		
	Please provide details of your curr	rent PI insurance:		
	Insurer	Cover amount \$ any or	one claim	
	Start date///	Expiry date / /		
☐ Schedule and Certificate of Currency (CoC) attached³ OR		urrency (CoC) attached ³		
	☐ I need to arrange PI Insurance contact me. ³	with this application: please authorise the IPA's preferred insurance	provider to	

¹For more information, visit <u>www.tpb.gov.au/bas-services.</u>

²Depending on services you provide to the public, you may need to apply for a Professional Practice Certificate instead of a Public BAS Practitioner Certificate. Please refer to www.publicaccountants.org.au/membership/ppc/eligibility-and-requirements.
³Applying for PI insurance prior to approval of your membership application is done at your own discretion. However, the IPA will not finalise your membership as a Public BAS Practitioner application until we receive your PI insurance Schedule and CoC. Please note that the cover amount minimum is \$1,000,000 any one claim, with at least one reinstatement, preferably unlimited reinstatement.



I declare that:

- I have read the IPA's membership price list and understand that I will be charged a certificate fee, an administration fee and a Public BAS Practitioner membership fee. I understand my first year membership fee is pro rata according to the month in which I join, then annually thereafter due on 1 July - refer to the link in Section I on the next page.
- I understand that by providing the credit/debit card details or cheque details, I am confirming that I have sufficient funds and have authorised for IPA to process all the fees relevant to this application as prescribed in Section I. I also understand that my membership will not become active until the payment has been received by the IPA and I will receive a tax invoice/receipt via email upon successful payment.
- I have read the Privacy Policy⁴ and consent to my personal information being collected, used and disclosed for the purposes outlined.
- I understand that my eligibility for membership will be based on the information and supporting documents that I have supplied for this application.
- I understand that the IPA has an investigations and disciplinary process⁵ to accept written complaints against IPA members. I also understand that as a condition of membership, all IPA members are subject to this investigation and disciplinary process for alleged breaches of the IPA Constitution, By-laws, Pronouncements⁶ and professional and ethical standards.
- If admitted to Public BAS Practitioner membership,
 - I agree to abide by the IPA Constitution, By-laws and Pronouncements and all standard setter and regulator rules, guidance statements and authoritative interpretations including, but not limited to those issued by the Accounting Professional and Ethical Standards Board (APESB), the TPB, the Australian Securities and Investments Commission (ASIC), the Australian Accounting Standards Board (AASB) and the Auditing and Assurance Standards Board (AUASB);
 - b. I agree to undertake and keep a record of my continuing professional development activities, meeting the requirements of Pronouncement 7;
 - c. I agree to complete the IPA's Public BAS Practitioner Program within six months of admission;
 - d. I agree to maintain professional indemnity insurance that complies with IPA requirements;
 - e. I agree to advise the IPA should I become bankrupt, be charged with any criminal offence or be the subject of an adverse finding by any professional or regulatory body;
 - f. I agree to advise the IPA should there be any business sale, merger, liquidation or litigation; and
 - q. I understand that I must apply for a Professional Practice Certificate if I offer professional services other than BAS services as prescribed by the Tax Agent Services Act 2009 to the public and my turnover exceeds the tax-free threshold or if I market my professional services to the public.

I certify that the information provided on this application form and attachments is true and correct.

Full name	
Signature	Date//

www.publicaccountants.org.au/about/complaint-investigation.

⁶For the IPA Constitution, By-laws and Pronouncements, go to www.publicaccountants.org.au/about/obligations. Failure to comply with these regulations may result in disciplinary action.



IPA Program

The IPA Program is conducted in association with the Deakin University. This is the IPA's key pathway to professional advancement as well as a great opportunity to obtain a Master of Business Administration (MBA) from Deakin University. Please refer to FAQ 6 or visit www.publicaccountants.org.au/education/ipa-program. If you would like more information, please tick here. ☐ Yes

⁴For full Privacy Policy and Collection Notice, go to www.publicaccountants.org.au/portal/privacy-and-policy.

⁵For the IPA Complaint Investigation and Member Disciplinary Action information, go to

Where did you hear about us?			
☐ Contacted by an IPA staff member ☐ Magazine ☐ Search engine ☐ Facebood ☐ YouTube ☐ LinkedIn ☐ IPA website chat box ☐ University ☐ TAFE ☐ Fried ☐ Work colleague ☐ IPA member ☐ IPA CPD events ☐ Other:	ends		
Payment details			
Your application must include payment of:			
 A non-refundable certificate fee of \$105.00 and a non-refundable administration fee of \$55.00; AND Public BAS Practitioner membership fees payable (see www.publicaccountants.org.au/become-a-member/how-to-apply/fees). 			
Payment authority			
☐ I have enclosed a cheque/money order payable to "Institute of Public Accountants"			
OR	OFFICE USE ONLY		
☐ Please charge my ☐ AMEX ☐ MasterCard ☐ Visa	Certificate fee \$105.00		
Card number Expiry date /	Administration fee \$55.00		
Cardholder name	Public BAS Practitioner membership fee \$		
Signature//	Total amount due \$All fees are GST inclusive		
Upon payment, you will receive a Tax Invoice email.	Campaign code #		

Did you know that the IPA has a *Find a Public BAS Practitioner* page on our website? If you wish to promote your business on the IPA website, once your Public BAS Practitioner membership is finalised, log into your IPA account and enter your business details on www.publicaccountants.org.au/find-an-accountant.

Any questions? Please contact us on 1800 625 625 (9 am – 5 pm (AEST), Monday to Friday).

How to submit your form:

Please scan and email your completed application with required documentary evidence to your local IPA office below.

Contact details for IPA offices

New South Wales & Australian Capital Territory	Queensland
t (02) 8262 6000	t (07) 3034 0900
e nswdivn@publicaccountants.org.au	e qlddivn@publicaccountants.org.au
South Australia & Northern Territory	Tasmania
t (08) 8227 2255	t (03) 8665 3150
e sadivn@publicaccountants.org.au	e tasdivn@publicaccountants.org.au
Victoria	Western Australia
t (03) 8665 3150	t (08) 9368 7600
e vicdivn@publicaccountants.org.au	e wadivn@publicaccountants.org.au