



Use this form to apply for a NEW occupation code or when you need a reassessment of your qualifications that have already been undertaken by the Institute of Public Accountants.

Reference No. _____ Date of Last Assessment ____/____/____

Select your Nominated Occupation

Choose one occupation code only.

- Accountant (General) ANZSCO code 221111
Management Accountant ANZSCO code 221112
Taxation Accountant ANZSCO code 221113
External Auditor ANZSCO 221213
Finance Manager ANZSCO code 132211
Corporate Treasurer ANZSCO code 221212

Your Details

Mr Mrs Miss Ms Other, please state _____

Gender Male Female Date of Birth ____/____/____

Given name _____ Family name/surname _____

Please list other names used if these are different from the name shown on your qualifications

Postal address _____

Suburb/Town/City _____ State _____

Postcode _____ Country _____

Phone _____ Mobile _____

Fax _____ Email _____

Agent or Authorised Person Details (leave blank if you are not using a Migration agent)

Business/Organisation Name: _____

Authorised Person's Name: _____

Postal Address _____

Suburb/Town/City _____ State _____

Postcode _____ Country _____

Phone _____ Mobile _____

Fax _____ Email _____

Your reasons for Re-assessment

It is important to include details of your claims. The reasons for your claim must include information or other evidence which addresses the original assessment. For example, "I want to apply for another occupation code" or "I have completed extra units to make up the required core knowledge areas I was missing previously".

Payment

Categories	\$AUD	Please Tick
Qualifications Reassessment within 12 months from the date of the initial assessment	235	<input type="radio"/>
Qualifications Reassessment over 12 months from the date of the initial assessment	550	<input type="radio"/>
Qualifications Reassessment Fast Track (2 business day response)	660	<input type="radio"/>

Payment of fee is to be by bank cheque, overseas bank draft in Australian dollars or credit card. The IPA is not able to accept cash, and is not responsible for the loss of mail. The fee is not refundable.

I have enclosed a bank cheque/money order payable to 'Institute of Public Accountants'

Please charge my Amex Mastercard Visa

Card number _____ Expiry date ____ / ____

Cardholder name _____

Signature _____ Date ____ / ____ / ____

TAX INVOICE: This form becomes a Tax Invoice upon payment. Please retain a copy for your taxation records.

Declaration

I declare that:

- Information I have supplied and any attachments are complete, correct and up to date;
- I undertake to inform the IPA of any changes to my circumstances while my application is being considered;
- I authorise the IPA to make any and all enquiries necessary to assist in this assessment and to use any information supplied in this application for that purpose;
- Information collected about me and any documents I attach can be disclosed without my consent where authorised or required by law, including to Department of Home Affairs (formerly DIBP);
- I agree with the terms and conditions for the assessment of my qualifications for the purposes of General Skilled Migration; as disclosed on the IPA website.

Applicant's signature _____ Date ____ / ____ / ____

Final Checklist

- All documents must be high quality colour scans or colour photocopies. Please note that the IPA may request original or certified true copies from time to time.
- Official academic transcripts/mark sheets for additional studies completed.
IELTS/TOEFL iBT/Pearson PTE Academic English/Cambridge English: Advanced (CAE) test results
- Completion letter/award certificate for qualifications recently completed
- Additional detailed subject outlines/syllabus details
- Letter of authority allowing the IPA to correspond and verify directly with the university concerning your studies

Submit your application

Email: immi_applications@publicaccountants.org.au