LEAVE OF ABSENCE APPLICATION

IPA INSTITUTE OF PUBLIC ACCOUNTANTS®

Please note the following when completing this form:

1. Applications for Leave of Absence should be received by **the due date for membership renewal**.
2. Leave of Absence is only available to current full financial members (AIPA, MIPA and FIPA) and is not available to either student or retired members.
3. A Leave of Absence from membership is available for a minimum period of one year to **a maximum of three years per lifetime.** Leave of Absence approval and approved period will be determined by the IPA based on the provided information from you and your membership history.
4. A fee of AUD $75.00 is due and payable with this application form.
5. Approval of this application will result in the immediate suspension of all the benefits of membership until such time as membership is resumed.
6. Membership fees are not payable during the approved period of absence.
7. In calculating years of membership, approved periods of leave are not included.
8. If you have a Professional Practice Certificate My Public Accountant (PPC - MPA) or a Public BAS Practitioner Certificate, these certificates will be cancelled on approval of the Leave of Absence. Upon reinstatement from the Leave of Absence, if you are in public practice, you will need to re-apply for registration and meet all current entry requirements.
9. During a Leave of Absence, IPA post nominals are not to be used and certificates of membership are to be returned to the IPA.
10. Access to the IPA website will be suspended during the approved period of leave.
11. A renewal notice will be issued at the expiry of an approved Leave of Absence and membership will resume on payment of fees advised on the renewal notice.

We will email you to advise the outcome of this application.

A Your personal details

○ Mr ○ Mrs ○ Miss ○ Ms ○ Other, please state _____ Member ID _____

Given name _____ Family name _____

Preferred mailing address _____

Suburb/Town/City _____ State _____ Postcode _____

Country _____

Mobile _____ Phone _____ Email _____

B Payment details

Your application must include payment of the Leave of Absence fee of AUD $75.00.

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

○ Please charge my ○ Amex ○ Mastercard ○ Visa

Card number _____ _____ _____ _____ Expiry date _____

Cardholder name _____

Signature _____ Date ____ / ____ / _____

Total amount due $75.00

Upon payment, you will receive a Tax Invoice by email.

All fees are GST inclusive

FOR MEM-020 V9_APR16

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 6368, Halifax Street SA 5000

TAS: GPO Box 244, Hobart TAS 7001 VIC: GPO Box 1637, Melbourne VIC 3001 WA: PO Box 7309, Cloisters Square WA 6850

C Request details

I wish to apply for a Leave of Absence for a period of: ○ 1 year ○ 2 years ○ 3 years Effective from: 1 / July / _____

Reason for this request:

○ Ill health ○ Maternity/paternity leave ○ Travel ○ Other

Note:

A Leave of Absence is not automatically granted. Please provide sufficient detail in your application to assist us in making a decision.

Information/evidence provided should include:

- The period during which you expect you will not be an active IPA Member.
- The reason(s) for a Leave of Absence.
- Copies of documentation in support of your application. This documentation may include: Medical Certificate/Employer Statement/Statutory Declaration.

Please indicate reason(s) for request: (if more space required please include additional page) _____

D Confirmation

I confirm that:

- the information provided in this application is a true and correct representation of my current situation
- I will notify the IPA of any changes to the circumstances under which I have applied for a Leave of Absence
- I will resume membership upon expiry of any approved Leave of Absence and be responsible for outstanding fees
- I relinquish all member rights including the use of my IPA post nominal and the IPA Logo during my approved Leave of Absence
- Whilst on leave of absence I understand that I am still subject to the provisions of the IPA Constitution, By-laws and Pronouncements[1]
- I have read and consented to IPA's Privacy Statement[2] regarding the collection and disclosure of the information supplied.

Signature _____ Date ____ / ____ / _____

[1] *The IPA Constitution, By-Laws and Pronouncements are available on the IPA website – publicaccountants.org.au/about-us/ipa-rules-and-standards. Failure to comply with these standards may expose a member to disciplinary action.*

[2] *Privacy Statement: The Institute of Public Accountants acknowledges the importance of privacy and of safeguarding personal information. Any personal details provided to the IPA will be protected in line with the Australian Privacy Principles and the laws and regulations regarding such matters as are applicable in Australia. The IPA will not collect or monitor any personal information about you without your consent nor will we use or disclose to others your personal details without prior authorisation unless: it is required by the law or the courts; it is necessary because of the service you are using or for a service you have requested; or to protect the rights or property of others. This information is being gathered to process your application; you may withhold providing the information but this will make processing your application difficult. The information requested is intended only for the use of the IPA and our approved service providers. For full Privacy Policy and Collection Notice, go to www.publicaccountants.org.au/portal/privacy-and-policy.*

FOR MEM-020 V9_APR16

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 6368, Halifax Street SA 5000

TAS: GPO Box 244, Hobart TAS 7001 VIC: GPO Box 1637, Melbourne VIC 3001 WA: PO Box 7309, Cloisters Square WA 6850