



INSTITUTE OF SOLOMON ISLANDS ACCOUNTANTS

P O Box 1581

Honiara,

Solomon Islands

Telephone: (677) 20131. Email: isiasecretariat@gmail.com

Application Form

ISIA partial grant Scheme for individuals members seeking to do CPAA COURSES

Before completing your application we recommend you read our eligibility and criteria guidelines on our application guidelines provided below

Please note that the grant will only cover for half of the cost of CPAA units, the other half will be covered by the individual themselves

All application must be completed and handed in for processing and selection by the council one month before the CPAA courses eventuates

The application may take 20 – 30 minutes to complete. Take your time to fill it, however due to limited space available for grant we kindly ask that you fill it up well and return in time.

The application consist of five (5) sections, you are required to complete all of them

APPLICATION SECTION

Section (1)- Personal Details

Surname: Middle Name: Given Name:

Gender: Nationality: Citizenship:

Date of Birth:

Section (2)-Contact Details

Area of Residence: Residential: Landline Mobile:

Email: _____ Post Office Box: _____

Section (3)-ISIA Membership Status

Class of Membership: Student

SICPA

Associate

ICPA

Registered book keeper

(tick box relevant to you)

Certificate Number: Years of membership:

Section (4)-Type of Course

CPAA Course sponsored under ISIA grant Scheme:

Section (5)-EMPLOYERS DETAILS

Name of Employer: _____

Address:

Phone:

Your Current Position:

Sign.....

Date:.....

The following criteria will determine your eligibility for the ISIA partial grant support for CPAA courses

- *Minimum of 3 years of membership*
- *Only one (1) CPAA course per member per year can be funded under this arrangement;*
- *A letter from employer to confirm that they are not paying for for such professional study for the applicant.*
- *Applicable for professional segments only;*
- *Failure of an exam paper will result in ineligibility for another year after the year in which the candidate did not pass the exam;*
- *Application are to be in writting to the secretariat*

Section (6) Official use only

Approved By:

Name:.....Sign.....Date.....