



### CPA Program Registration Form (I)

Program Enrollment Year & Semester: Semester 2, 2023

#### Student Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Citizenship Identity Card Number: \_\_\_\_\_

CPA Australia Member Number: \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Permanent Residential Address: \_\_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____

Mobile Phone Number: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please **submit a copy** of Citizenship Identity Card (CID).

#### Declaration by Student Registering for the CPA Program

I, \_\_\_\_\_, (Please Write Your Name) hereby certify the above information to be true, correct and complete. In case of any misinformation or false declaration I shall be held liable for the consequences.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

