

**CMA ANZ
UPGRADE
APPLICATION
FORM**

- >> AMA TO CMA
- >> GMA TO AMA

NEXT LEVEL AWAITS YOU



CMA
AUSTRALIA • NEW ZEALAND



Certified
Management
Accountants

Please complete this form using a typewriter or write your responses in BLACK ink using BLOCK CAPITAL LETTERS. If there is insufficient space continue on a separate sheet if necessary. Do not send any original documents with this form. All materials sent with this form will be retained by the Institute. You will be invoiced directly by the Institute if your application for the upgrading of membership is accepted by the Membership Committee.

**NEXT LEVEL
AWAITS YOU**

Post Nominals

Upgrade Your Qualifications

Government Relations

On Target

Training and Conferences

Magazine

MA Briefings

JAMAR Journal

Quality Networking

Grade of membership for which you wish to be upgraded: _____ Upgrade fee _____

Please tick one grade of membership application only

- Certified Management Accountant (CMA) AUD \$66.00
- Only for AMA members who have completed the CMA program
- Associate Management Accountant (AMA) AUD \$66.00
- Only for GMA members who have completed 3 years relevant experience

Part 1 PERSONAL INFORMATION

Current membership/certificate number _____ First year of membership _____
 Title: (Dr/Mr/Mrs/Ms/Miss/Other) _____ Preferred Name(s) _____
 First Name _____ Middle Name(s) _____
 Last Name(s) _____
 Date of Birth (dd/mm/yy) _____ Sex Male Female

Part 2 CONTACT DETAILS

Mailing Address - This is my Home Business
 Address 1: _____
 Address 2: _____
 Suburb _____ City _____ State _____
 Postcode _____ Country _____
 Home: () _____ Work: () _____ Mobile: _____
 Facsimile: () _____ Email _____

Part 3 PRESENT OR MOST RECENT EMPLOYMENT

Employer's Name _____ Date of Appointment _____
 Employer's Address _____
 Post Held/Current Occupation/Situation _____
 Brief Outline of Duties and Responsibilities _____

Important - You must provide your Curriculum Vitae detailing information of the management accounting experience that you think will be of significance to your application, eg. work in reporting to management; financial management; information systems; financial modelling; internal auditing; pricing; logistics; cost analysis etc. (These must be detailed in attached Curriculum Vitae)

Part 4 CMA MEMBERSHIP (To be completed by all AMA applicants upgrading to CMA status)

I have completed ICMA's CMA Program or obtained full credit for the program by undertaking a study program
 Student Number: _____ from (ICMA RPI or University) _____
 in year _____ (Please provide transcripts or certificate of completion for units completed)

Grade obtained for CMA units

<u>Units</u>	<u>Grade Obtained</u>
Strategic Cost Management	_____
Strategic Business Analysis	_____

NEXT LEVEL
AWAITS YOU

CFO

Management Accountant

Business Analyst

Financial Controller

Advisor

Finance Director

Accountant

Head of Finance

Consultant

Part 5 INDUSTRY & COMPANY SIZE

- | | |
|--|---|
| <input type="checkbox"/> Advertising/Marketing | <input type="checkbox"/> Association/ Membership Organisation |
| <input type="checkbox"/> Communications | <input type="checkbox"/> E-Business/E-Commerce |
| <input type="checkbox"/> Electricity/Gas/Water | <input type="checkbox"/> Finance and Banking |
| <input type="checkbox"/> Government – Admin/Defence | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Libraries, Museums and the Arts | <input type="checkbox"/> Mining/Extractive |
| <input type="checkbox"/> Personal Services (excl Financial Planning) | <input type="checkbox"/> Property Services |
| <input type="checkbox"/> Sport/Entertainment/Recreation | <input type="checkbox"/> Travel and Tourism |
| <input type="checkbox"/> Agriculture/Forestry/Fishing | <input type="checkbox"/> Business Services |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Education |
| <input type="checkbox"/> Film/TV/Radio | <input type="checkbox"/> Financial Services |
| <input type="checkbox"/> Health/Community Services | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Oil/Petroleum |
| <input type="checkbox"/> Printing/Publishing/Recording | <input type="checkbox"/> Recruitment |
| <input type="checkbox"/> Transport/Storage | <input type="checkbox"/> Wholesale/Retail Trade |

Number of Employees

- | | | | |
|-------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> 1 – 5 | <input type="checkbox"/> 6 – 10 | <input type="checkbox"/> 11 – 20 | <input type="checkbox"/> 21 – 50 |
| <input type="checkbox"/> 51 – 100 | <input type="checkbox"/> 101 – 200 | <input type="checkbox"/> 201 – 300 | <input type="checkbox"/> 301 – 500 |
| <input type="checkbox"/> 501 – 1000 | <input type="checkbox"/> 1000+ | | |

Part 6 EDUCATION BACKGROUND (Compulsory for all levels of membership)

(Academic and Vocational) Please list University and Post School courses/qualifications either obtained or currently being undertaken that will fulfill the educational requirements of the Graduate Member Program. These might include degrees, graduate diplomas, and any professional or other relevant qualifications

Qualifications	Institution	Year	Specialization
1 _____			
2 _____			
3 _____			
4 _____			

(Please provide transcripts of Awards obtained)

Accounting Qualification

You should have a “recognised” accounting qualification. Recognised accounting qualification is either :

- ✓An undergraduate degree with an accounting specialisation (at least 25% of the degree must be accounting and finance subjects) from an “accredited” university, or
- ✓A professional accounting qualification from a body granted a Royal Charter or Government Charter. Most “Certified” bodies are also acceptable, however, in some countries, as the word “Certified” is not a restricted term, there are some accounting bodies using “certified” in their title that would be unacceptable to the CMA ANZ as a recognised accounting qualification.
- ✓Those holding membership of the following accounting professional bodies HAVE been recognised in the past by the ICMA as having a recognised accounting qualification.

All Chartered Accounting bodies worldwide

- | | |
|-------------------|------------------|
| AICPA (USA) | CPA Australia |
| MIA (Malaysia) | MICPA (Malaysia) |
| ICPAS (Singapore) | ICWA (India) |
| ICMA (Pakistan) | CIMA (UK) |
| CACA (UK) | ICSA (UK) |
| CGA (Canada) | SMA (Canada) |
| CPAC (China) | LACPA (Lebanon) |

Saudi Organisation of CPAs (Middle-East)

Please check FAQ section on www.cmawebline.org for more updated information.

Application Checklist

- Duly filled application form
- Upgrade fee (part 10)
- Signatures (part 11 & 12)
- CV (maximum 5 pages)
- Copy of academic transcripts
- Copy of membership certificates
- Other supporting documents

Part 7 PROFESSIONAL MEMBERSHIPS (Provide current membership number)

1 _____
2 _____
3 _____

Part 8 PROFESSIONAL INTERESTS

Please select the topics that you would like to receive information about. We will send you technical alerts and e-newsletters relating to these.

- | | |
|--|--|
| <input type="checkbox"/> Auditing – External | <input type="checkbox"/> Advisory Services |
| <input type="checkbox"/> Management Consulting | <input type="checkbox"/> Company Secretarial |
| <input type="checkbox"/> Ethics | <input type="checkbox"/> External Reporting |
| <input type="checkbox"/> Financial Markets | <input type="checkbox"/> General Management |
| <input type="checkbox"/> Information Management / Technology | <input type="checkbox"/> Insolvency and Reconstruction |
| <input type="checkbox"/> Management Accounting | <input type="checkbox"/> Public Sector Issues |
| <input type="checkbox"/> Securities / Funds Management | <input type="checkbox"/> Superannuation |
| <input type="checkbox"/> Treasury | <input type="checkbox"/> Auditing – Internal |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Corporate Governance |
| <input type="checkbox"/> E-Business / E-Commerce | <input type="checkbox"/> Financial Control |
| <input type="checkbox"/> Financial Planning | <input type="checkbox"/> Human Resources / Training/ |
| <input type="checkbox"/> Industrial Relations | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Law | <input type="checkbox"/> Marketing / Sales |
| <input type="checkbox"/> Risk Management | <input type="checkbox"/> Small Business |

Part 9 YOUR COMMUNICATION PREFERENCE

How would you like us to contact you? Email Mail Fax

Part 10 NON REFUNDABLE APPLICATION FEE

If my application is approved by the ICMA membership committee I would like to pay the upgrade fee of AUD \$66.00 by:

Money Order/Bank Draft payable to - Institute of Certified Management Accountants (Aus)

Cheque Number _____ Date _____

Bank / Institution _____ Branch _____

Credit Card MasterCard Visa

Please email info@cmaaustralia.edu.au for a payment link

Part 11 ACCEPTANCE OF RULES

I _____ (name) desire to become a _____ (grade of membership) member with the CMA ANZ. In the event of my admission as a member, I agree to be bound by the Rules of the Institute of Certified Management Accountants for the time being in force.

Signature of Applicant _____ Date _____

Part 12 PROPOSER (If required we will contact the proposer of this application)

I _____ (name), who is a _____ (grade of membership) member of the Institute of Certified Management Accountants or name of other recognised professional accounting body (below), nominate the applicant, who is personally known to me, for membership.

Proposer member of _____ Membership No. _____

Address of Proposer _____

Suburb _____ City _____ State _____

Postcode _____ Country _____

Work: () _____ Email _____

Signature of Proposer _____ Date _____

For Official Purposes Only (Applicants do not complete)

- | | |
|--|---|
| <input type="checkbox"/> Application Received On: | <input type="checkbox"/> Membership Consideration On: |
| <input type="checkbox"/> Approved- Membership No: | <input type="checkbox"/> Not Approved- Reason: |
| <input type="checkbox"/> Applicant Informed of Decision On: | <input type="checkbox"/> Invoiced On: |

Mail all applications to:

The Executive Director,

**The Institute of Certified
Management Accountants**

CMA House,

Unit 5, 20 Duerdin Street,

Clayton North, Victoria 3168

AUSTRALIA.