

**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 by writing your responses in BLACK ink using BLOCK CAPITALS. 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 AND have 5 years relevant experience
- Associate Management Accountant (AMA) AUD \$66.00  
- Only for GMA members who have completed the CMA Program OR have 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  Other

**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, ESG Reporting 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 Zoom/WITS/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**

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

**Number of Employees**

- 1 – 5
- 6 – 10
- 11 – 20
- 21 – 50
- 51 – 100
- 101 – 200
- 201 – 300
- 301 – 500
- 501 – 1000
- 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 or finance qualification or equivalent, i.e. 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.cmaweblne.org](http://www.cmaweblne.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 if approved by the ICMA membership committee I would like to pay the upgrade fee of 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](mailto: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.