

**CPA PUBLIC ACCOUNTING
CHARGEABLE HOURS SUBMISSION FORM FOR BRIDGING PURPOSES**

Applicability:

This form is to be completed by CPA members who are employed in a registered public accounting firm and need to report chargeable hours for the purpose of seeking a licence to practise public accounting.

Requirements for Completion:

Sections 1, 2, 3 and 4 to be completed by the CPA member. Section 5 must be completed by the Designated Member* at the registered firm. The form must be completed in full and signed off by the CPA applicant member and the Designated Member.

Method of Submission:

Members applying for an assurance licence must also complete and attach the Chargeable Hour Tracking Report.

Questions:

For questions on how to complete this form and/or how to complete/submit a tracking report , please contact publicpractice@bccpa.ca.

1 Personal Information	
Legal Name: (First Middle Last)	CPA ID Number:
Reason for submitting this form:	
<input type="checkbox"/> 1. I have completed the CPA practical experience requirements	
2. I am wanting to update my hours and	
<input type="checkbox"/> I have additional audit hours and wish to have them recorded with CPABC.	
<input type="checkbox"/> I have additional review hours and wish to have them recorded with CPABC.	
<input type="checkbox"/> I have additional compilation hours and wish to have them recorded with CPABC.	

2 Employment Information			
Firm Name:			
Street Address:	City:	Province:	Postal Code:
Employment start date:		Employment end date (if applicable):	
Experience Route and Category:			
<input type="checkbox"/> Pre-approved Program Route (PPR)		<input type="checkbox"/> Experience Verification Route (EVR)	

If you selected PPR, then please state the name of pre-approved program at above named employer:

Type of Employment (select one):

- Full-time
- Part-time
- Co-op
- Summer

If any of the time reported above was on a secondment, please indicate the following:

Secondment start date: _____

Secondment end date: _____

Firm name: _____

Firm location: _____

3

Chargeable Hours Summary

List the chargeable hours completed in current reporting period in the appropriate category:

Hours Completed	Audit HFS**	Review HFS**	Assurance other	Compilation

**HFS refers to assurance engagements that are performed on Historical Financial Statements as set out in the prevailing CPA Canada Handbook – Assurance (formerly the CICA Handbook – Assurance)

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CPA Member Confirmation

I declare that all the information given in this form is true and correct.

CPA Member signature:

Date:

5

Employer Confirmation

I confirm that the CPA member named above has obtained the chargeable hours for the purposes of practising public accounting as indicated above.

Designated Member* signature:

Designated Member name:

Date:

*Designated Member - This would be a designated CPA who is a member in good standing and currently has the appropriate public practice registration with the applicable provincial body in order to sign off on this form. For Pre-Approved Program Route paths, the Designated Member would be the Pre-Approved Program Route Leader.