Guam Board of Accountancy 335 South Marine Corps Drive, Suite 101, Tamuning, GU 96913 Tel: 671-647-0813 Fax: 671-647-0816 Website: www.guamboa.org Email: exammgr@guamboa.org

Uniform CPA Exam Application

(Revised 5/16/14)

Requirements and Additional Information

1. Education

- A. You need a Baccalaureate Degree or equivalent education or higher from an accredited college or university to sit for the exam.
- B. You must have completed a Baccalaureate Degree equivalent or higher to qualify for issuance of a CPA license
- C. 24 credit hours must be in upper division accounting courses, including the following courses:
 - 3 credit hours in Financial Accounting
 - 3 credit hours in Auditing
 - 3 credit hours in Taxation
 - 3 credit hours in Management or Cost Accounting
- D. 24 credit hours must be in **Business**, which should include the following courses:
 - 6 credit hours in Economics
 - 3 credit hours in Finance
 - 3 credit hours in Business Law

Note: "credit hour" means a conventional college "Semester" hour. "Quarter" credit hours may be converted to Semester hours by multiplying by two-thirds (2/3) (e.g. 36 guarter hours equals 24 semester hours).

E. Transcripts must be sent from your college or university directly to the Guam Board of Accountancy.

2. Foreign Degrees

Foreign degrees MUST be evaluated by a foreign academic credential evaluation service. You must apply to them directly and complete, detailed evaluations must be sent directly to the Board at the above address.

3. Application

The enclosed Uniform CPA Examination Application must be completed, signed and returned with your passport size photo, the signed Rules on Cheating form, any other applicable documents or forms, and your application fee.

4. Initial and Re-exam Applicants

You are an **INITIAL** applicant:

- If you are sitting for the exam for the first time as a Guam candidate
- even if you have previously taken the exam in another jurisdiction (requires Transfer of Grades form)

You are a **RE-EXAM** applicant:

- If you have previously taken the exam as a Guam candidate
- Please enter your previously assigned NASBA candidate I.D. number from your NTS (if available)

5. Mother's Family (Maiden) Name

Please enter your Mother's Family Name on your application. This is a security feature to verify your identity; you should enter a name or word that only you will know. IF you leave it blank, we will enter the word "unknown" in the NASBA On-Line system and you must remember to enter "unknown" when you log-in to NASBA's On-line system.

6. Application and Examination Fees

- A. You must pay a non-refundable application fee to the Guam Board of Accountancy with your examination application. Please make payment for your \$50.00 Application Fee payable to Guam Board of Accountancy.
- B. Examination Section Fees are paid to NASBA. These fees are paid only after Guam sends an Authorization to Test (ATT) to NASBA and you are billed. These fees may be paid online with a credit card to NASBA.

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Currently, these fees are:

•	Auditing and Attestation	\$192.03
•	Business Environment and Concepts	\$172.51
•	Financial Accounting and Reporting	\$192.03
•	Regulation	\$172.51

(Note: Please refer to the CPA Exam Fee Planning Analysis for future fee changes)

- C. A **Guam Computer Testing Center Surcharge** of \$110 per test section must be paid directly to NASBA by all candidates other than Guam residents. You may pay this fee at http://www.nasba.org/nasbaweb.nsf/exam.
- D. You may apply for one or more section(s) of the examination at a time.

7. Applicants with Disabilities

If you have a verifiable disability, you may apply for **special accommodations** to sit for the Uniform CPA Exam. Please complete a **Request for Special Accommodations** form for consideration.

8. Notice to Schedule

Once the Guam Board of Accountancy determines you are eligible to sit for the exam, an Authorization to Test (ATT) will be sent to NASBA. NASBA will then issue you a **Notice to Schedule (NTS)**. Once you receive your **NTS** you may contact the Guam Computer Testing Center to schedule your exam. Please note your **NTS** is only valid for a six (6) month period and you MUST schedule your exam within that time. The Guam Board of Accountancy has no role in the scheduling process for any test center. You may call the Guam Computer Testing Center directly at 671-475-5000 or visit the Prometric website at www.prometric.com to schedule your examination(s). You may schedule examinations during the first two (2) months of each calendar quarter, as follows:

TESTING MONTHS	NO TESTING
JAN-FEB	MAR
APR-MAY	JUN
JUL-AUG	SEP
OCT-NOV	DEC

9. Examination Sections and Credit

The passing grade is 75 or better for any section. Credit for any section passed is valid for 18 months from the date of examination. Candidates cannot retake a failed section of the examination in the same window.

SECTION CODE – Description	Duration
AUD - Auditing and Attestation	4.0 hours
BEC - Business Environment and Concepts	3.0 hours
FAR - Financial Accounting and Reporting	4.0 hours
REG – Regulation	3.0 hours

10. Contact Method Preference for Notification

ALL notifications or correspondence will be sent to you by the Contact Method Preference you indicate on your application (e.g., if you select email, **ALL** notifications or correspondence will be sent to your email address)

11. Address or Name Change

Any name, address or email change MUST be reported to the Guam Board of Accountancy promptly. Failure to do so will result in your **not** receiving notices of grades and other official correspondence. Please complete a Change of Address/Name form.

Please contact us with any questions you may have via email: mailto:exammgr@guamboa.org.

Please also visit these other websites that may be of assistance: www.nasba.org and www.cpa-exam.org

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Check One:	(Please be sure)		RE-EXA he appropriate applica	M Applicai ation fee)	nt(Previous NASBA Car) ndidate I.D. Number	
APPLICANT LEGA	L NAME (Must EX	ACTLY MATC	H Your Photo ID/Passp	oort - Please	type or print legibly)		
LAST			FIRST		MI	DDLE	
Previous Legal	Name, if any:			Moth	Mother's Family (maiden) Name:		
Last, Fi	rst, Middle			(THIS I	S A SECURITY FEATUR	E - DO NOT LEAVE BLA	ANK)
PERSONAL IDENT	IFICATION INFOR	MATION					
SOCIAL S	SECURITY NUMBE	R (If none, us	e Passport Number &	Country)	BI	RTH DATE (MM/DD/YY	YY)
CURRENT MAILING	G ADDRESS and	CONTACT IN	FORMATION				
	STREET	(include Apt	# or Suite #)				
CITY		S ⁻	TATE/TERRITORY/PR	EFECTURE/	COUNTRY	ZIP/POSTAL CO	DDE
TELEPHO	DNE.		ACSIMILE		EMAIL		
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And Attes			Reporting (FAR)		(REG)	(BEC)	
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Education:			Datas Attas	-11	Data of Danies	D	
College o	or University Na	ime	Dates Attended		Date of Degree	Degree Awarded	
ALL Candidate	e MIIST anew	or the follo	wing questions:				
			.			Vas	Na
•			other jurisdiction?			Yes	No
			take the CPA Exa			Yes	No
•	•		take the CFA Exa			163	INO
Have you ever h	nad any profess	sional licens	se (or application) i	efused, su	ıspended	Yes	No
or revoked? If y	es, attach a de	tailed expla	nation.				
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ALL Candidates MUST answer the following que	stions (continued):		
Have you ever been convicted of a crime other than traffic violations? If yes, attach a detailed explanation	n.	Yes	No
Do you have a disability that requires special arrang If yes, please submit a Request For Special Accor form with this application (available at www.guambo	nmodations	Yes	No
Attach a 2 X 2 photo taken within the last 3 months. Photo must be full face, from your shoulders up. Sign your legal name at the bottom of your photo and print your full legal name on the back of your ph	oto.		
DO NOT write across your facial features.			
Return your completed application with all approach Applications are NOT deemed received until all for			
Making misrepresentations or false state	ements in this application	is cause for denial of a	a license.
By submitting this application, I certify to the truth a this application, and I consent to investigation by the			sentations made in
I agree to keep confidential and not to disclose in ar the Uniform CPA Examination questions or cont acknowledge that such information is valuable prop the Uniform CPA Examination.	ent that I may acquire a	s a result of taking th	e examination. I
I agree that a breach of these terms may result in n prohibited from sitting for the examination for a spec breach is also an infringement of the AICPA copyri- additional civil and criminal penalties, including, but	sified period of time, and/or ght, which will entitle the A	subject to civil and crimi	nal penalties. Any and subject me to
Print Full Legal Name:		Date:	
Signature:			
Initial Applicant's Checklist: US\$50.0	00 Fee payable to Guam Bo	pard of Accountancy	
Signed Application and Rules of Cheating	g form Photo – 2x	2 or Passport size	
Copy of Photo Identification (ID)	Education	evaluation, transcripts, e	tc. (sent separately)
OFFICE USE ONLY:			
Receipt #:Date:	Check #:	Amount US\$:_	