

Title

Surname Forename(s)

Mauritius Institute of Professional Accountants

(Established under Financial Reporting Act 2004)

MEMBERSHIP READMISSION FORM

(For Public Accountants)

YEAR 2023-2024

SECTION A – PERSONAL DETAILS

Maiden Name						
Nationality	NIC No.					
Date of Birth Age						
Gender						
Residential Address						
Phone	Mobile					
E-mail						
SECTION B – I	EMPLOYMEN	T DETAILS	\$			
Name of emplo	oyer					
Address of em	ployer					
Contact details of employer						
Title/Position a	at Work					
Sector (Tick as approp	priate)		 □ Public Practice □ Accounting/Audit Firm □ Academia/Education □ Other (Please specify) 	ıs	□ Public Sector□ Business Industry□ Not Active	
Name of Firm/Company in which you are involved as Partner/Director		1. 2. 3.				
In what capacity are you involved in the Firm/Company specified above		1. 2. 3.				
			1.5.			







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SECTION C - PROFESSIONAL DETAILS

Professional Accountancy Organisation			
Date of Membership			
Membership Number			
Do you hold a practising certificate from			
your qualifying Professional	\square Yes	\square No	
Accountancy Organisation? (Where			
applicable)			

SECTION D – **PRACTISING DETAILS**

Date you intend to Re - commence practising	
You intend to commence practising as	 □ a sole practitioner/director □ a partner/co-director □ both a sole practitioner and a partner/co-director □ an employee of a firm registered with MIPA

SECTION E – PROFESSIONAL INDEMNITY INSURANCE

Insurance Company	
Policy Number	
Valid up to	
Amount Insured	

SECTION F – BUSINESS TRANSACTIONS

Please indicate your main personal specialisms with a tick (\checkmark) in the columns below.

1	Management Accounting	11	Planning & Strategy	
2	Financial Management	12	Training or Human Resources	
3	Taxation	13	Practice Management	
4	Internal Audit	14	Global Business	
5	Statutory Audit	15	Administration	
6	Corporate Accounting & Reporting	16	Company Secretarial	
7	Management Consultancy	17	Pensions	
8	Investment Advice	18	Marketing	
9	Insolvency and/ or Recovery	19	Information Technology	
10	Treasury	20	Other (Please specify)	





Email: info@mipa.mu Website: www.mipa.mu



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SECTION G (i) - AML/CFT ACTIVITIES

Please indicate if you prepare or carry out transactions concerning the following activities with atick (\checkmark) in the column below.

	List of Activities as Per Recommendation 22 of the Financial Action Task Force	Yes	No
a)	Buying and selling of real estate		
b)	Managing of client money, securities, or other assets		
c)	Management of bank, savings, or securities accounts		
d)	Organisation of contributions for the creation, operation or management of legal persons such as a company, a foundation, a limited liability partnership or such other entity as may be prescribed		
e)	Creating, operating or management of legal persons or arrangements, and buying and selling of business entities		
f)	Creating, operating or management of legal persons such as a company, a foundation, an association, a limited liability partnership or such other entity as may be prescribed, or legal arrangements, and buying and selling of business entities		
g)	another person to incorporate, register or set up, as the case may be, a company, a foundation, a limited liability partnership or such other entity as may be prescribed		
h)	providing a registered office, a business address or an accommodation, a correspondence or an administrative address for a legal person such as a company, a foundation, a limited liability partnership or such other entity as may be prescribed; or		
i)	acting, or causing for another person to act, as a nominee shareholder for another person.		

Note: Failure to provide accurate and true information to this section is a breach of section 19J(4) of FIAMLA.

SECTION G (ii) - AML/CFT ACTIVITIES

Please indicate if your client/s prepares or carries out transactions concerning the following activities with a tick (\checkmark) in the column below.

	List of Activities as Per Recommendation 22 of the Financial Action Task Force	Yes	No
a)	Buying and selling of real estate		
b)	Managing of client money, securities, or other assets		
c)	Management of bank, savings, or securities accounts		
d)	Organisation of contributions for the creation, operation or management of legal persons such as a company, a foundation, a limited liability partnership or such other entity as may be prescribed		
e)	Creating, operating or management of legal persons or arrangements, and buying and selling of business entities		
f)	Creating, operating or management of legal persons such as a company, a foundation, an association, a limited liability partnership or such other entity as may be prescribed, or legal arrangements, and buying and selling of business entities		
g)	another person to incorporate, register or set up, as the case may be, a company, a foundation, a limited liability partnership or such other entity as may be prescribed		







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	providing a registered office, a business address or an accommodation, a correspondence	
h)	or an administrative address for a legal person such as a company, a foundation, a limited	
	liability partnership or such other entity as may be prescribed; or	
i)	acting, or causing for another person to act, as a nominee shareholder for another person.	

Note: Failure to provide accurate and true information to this section is a breach of section 19J(4) of FIAMLA.

SECTION H - BUSINESS SECTOR

Please tick (\checkmark) boxes below to indicate the nature of business carried by your organisation.

1	Agriculture, Forestry, Fisheries		
2	Building, Construction, Civil Engineering		
3	Business Services / Consultancy		
4	Catering, Hotels, Tourism		
5	Distribution – Retail and/ or Wholesale		
6	Financial Services / Property – Banking, Insurance, Investment Management Companies, Security Dealing, Property and Real Estate		
7	Food, Drink and Tobacco		
8	Government, Public Sector, Regulatory Bodies etc.		
9	Industry – Tools, Chemicals / Plastics, Textiles, Pharmaceuticals, Domestic Products, Electrical Goods, Electronics, Furniture/ Wood Products, Printing, Packaging		
10	Media – Arts, Entertainment, Publishing, etc.		
11	Utilities – Power, Electricity, Gas, Water Supply		
12	Social Services, Health and Education		
13	Transport Storage, Shipping, Telecommunications		
14	Professional services as defined under the Financial Reporting Act (Accounting, Auditing		
	Taxation, Bookeeping, ect)		
15	Others (Please specify)		







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SECTION I – DECLARATION

I hereby declare that:

- 1. I am a citizen of Mauritius or, being an expatriate, I hold, or I am legally exempted from holding a work permit/occupation/residence permit.
- 2. I am a compliant member of the Professional Accountancy Organisation from which I have qualified.
- 3. I declare that I am currently a fit and proper person and have not been convicted or been found guilty of any criminal offence in any country.
- 4. I have not been subject to disciplinary actions by a Professional Accountancy Organisation/Regulatory Authority.
- 5. I undertake that, for so long as I am a member, I will observe and comply with the Financial Reporting Act and other laws, rules and regulations, policies, and guidelines issued by MIPA. I confirm that I have read the IFAC Code of Ethics issued by the IESBA for Professional Accountants and comply to same.
- 6. I confirm that I hold a valid Practising Certificate (where applicable) from my Professional Accountancy Organisation.
- 7. I hold an up to date Professional Indemnity Insurance or I provide such other financial guarantee as determined by MIPA.
- 8. I have made arrangements for the continuity of my firm's practice in the event of my death or incapacity.
- 9. I confirm that I have declared 40 units of CPD to MIPA through its online platform, www.mipa.mu.
- 10. I hereby authorise the Mauritius Institute of Professional Accountants to contact my registering Institute / Association to disclose more information on the particulars above, if necessary.
- 11. I enclose herewith the readmission fee in the sum of Rs 5,000 and arrears (if any), and upon approval of the application I undertake to pay the annual fee in the sum of Rs5,000, being dues for the period from 1 July 2023 to 30 June 2024, as detailed below.
- 12. I, the undersigned, confirm that the details I have given are true and accurate to the best of my knowledge. I understand that a false declaration on this form may lead to disciplinary action against me and/or may invalidate any decision related to the application. If there is a change in my particulars, I undertake to inform MIPA within 30 days of this change.

Date:	Signature:
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SECTION J - FEES

		Rs	Rs
Dublic Assessment (DDA)	Readmission Fee	Rs 5,000	
Public Accountant (PBA)	Annual Fee	Rs 5,000	
	Arrears		
Total Payable			

SECTION K - DOCUMENTS TO BE SUBMITTED ALONG WITH THE READMISSION FORM

Public Accountant

- ✓ A copy of a valid Practising Certificate from a Professional Accountancy Organisation (where applicable)
- ✓ Good standing letter from Professional Accountancy Organisation (not dated more than 3 months)
- ✓ A copy of National Identity Card/Passport
- ✓ An updated Professional Indemnity Insurance Cover
- ✓ A copy of Continuity Practice Agreement
- ✓ Curriculum Vitae
- ✓ A copy of Marriage Certificate (if name is different from that on certificate)
- ✓ A copy of Residential/Occupational/Work Permit (where applicable)
- ✓ Professional level certificate or transcript from Professional Accountancy Organisation
- ✓ Testimonial/Undertaking from employer(s)
- ✓ Evidence of CPD completed

Note: Failure to provide applicable document(s) at time of registration might result in delays or refusal to process theregistration.



