



Mauritius Institute of Professional Accountants

# Mauritius Institute of Professional Accountants

(Established under Financial Reporting Act 2004)

**COMPULSORY**

Registration No: MRN ...../.....

## MEMBERSHIP RENEWAL FORM

**(PFA & PBA)**

**YEAR 2019-2020**

### **Membership Update (1 July 2019 to 30 June 2020)**

**(In terms of Rule 5 of the Rules governing Membership Requirements)**

*PLEASE COMPLETE THE FOLLOWING ONLY IF YOU HAVE NOT UPDATED YOUR DETAILS ONLINE*

#### **A. MEMBERSHIP DETAILS (as applicable)**

Professional Accountant

Public Accountant

<b>Name</b>			
<b>Address</b>			
<b>Professional Accountancy Body/Bodies</b>			
<b>Tel No:</b>	<b>Fax No:</b>	<b>Mobile No:</b>	<b>Email:</b>

#### **Employment Class (for individual members only)**

Partner in Practice

Employee in Practice

Industry

In Government

Other (Please specify)

Academic

.....

#### **COMPULSORY**

<b>Name and Address of Employer</b>	
<b>Name of Member Firm(s) in which you are involved as Partner/Director</b>	



Suite 1104, 11<sup>th</sup> Floor, SIT Business Centre, THE CORE, 62, Cybercity, Ebene

Tel: 4677096 Fax: 4681880

Email: [info@mipa.mu](mailto:info@mipa.mu) Website: [www.mipa.mu](http://www.mipa.mu)



International Federation of Accountants®



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### B. DECLARATION (for individual members only)

(Under Section 51(5) and 52 of The Financial Reporting Act 2004 and Rule 5 of the Rules governing Membership Requirements of MIPA)

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/occupational/residence permit.
2. I am a compliant member of the Professional Accountancy Body from which I have qualified.
3. I have not been convicted or been found guilty for any criminal offence in any country.
4. I have not been subject to a disciplinary action by a Professional Accountancy Body/Regulatory Authority. I undertake that, for so long as I am a member, I will observe the rules and regulations of MIPA.
5. In respect of the renewal of my membership as a **Public Accountant**,
  - a. I hereby submit my updated Practicing Certificate (Where Applicable) from my professional body. **(Please attach a copy)** (If not applicable, please delete).
  - b. I hold an up to date Professional Indemnity Insurance **(Please attach a copy)**, or provide such other financial guarantee as determined by MIPA.

*(Note: Failure to comply with **section 5** (as listed above) might result in non-renewal of your membership at MIPA)*

6. I confirm that I have declared 40 units of CPD to MIPA through its online platform, <http://mipa.mu/login/php>
7. I confirm that the details I have given are true to the best of my knowledge at the time of signing. If there is a change in my particulars, I undertake to inform MIPA within 30 days of this change.
8. I confirm that I have read the IFAC Code of Ethics issued by the IESBA for Professional Accountants and adhere to the same.

*(Note: Members employed by the Government, a local authority under the Local Government Act 2011 or the Rodrigues Regional Assembly under the Rodrigues Regional Assembly Act are exempted from paying Membership fees and must provide proof of employment.)*

Date: \_\_\_\_\_

Signature: \_\_\_\_\_



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## C. FEES

### Membership Fees

Subscription (1 July 2019 to 30 June 2020) (Please complete this section)

	Annual Membership Fees 2019 - 2020	Rs
Professional Accountant (PFA)	Rs 2,000	
Public Accountant (PBA)	Rs 2,000	
<b>Total Payable</b>		

## D. DOCUMENTS TO BE SUBMITTED ALONG RENEWAL FORM

### Professional Accountant

- ✓ Proof of employment (for Members employed by the Government, a local authority under the Local Government Act 2011 or the Rodrigues Regional Assembly under the Rodrigues Regional Assembly Act)

### Public Accountant

- ✓ A valid Practising Certificate from Professional Accountancy Organisation (where applicable)
- ✓ An updated Professional Indemnity Insurance Cover
- ✓ Return of Continuous Professional Development (CPD) points

*Note: Failure to provide applicable document(s) at time of renewal might result in refusal to process the renewal.*