

SUMMARY OF CHARGEABLE HOURS FORM

This form is only for use by candidates in the CPA Pre-Approved Program Route (PPR) in External Audit.

Completing the form is required when a CPA candidate switches employment from one pre-approved program to another pre-approved program within the same or a different licensed firm, switches from a pre-approved program route to an experience verification route, terminates employment, or when the candidate has satisfied all the CPA practical experience requirements for membership.

1. PERSONAL INFORMATION	
Legal Name:	CPA Number:
First Middle Last	
Reason for submitting this form: <ol style="list-style-type: none"> 1. I have completed the CPA PER practical experience requirements 2. I am leaving my position <ul style="list-style-type: none"> I have secured a new position in a PPR I am moving to an EVR position I am reporting a Prior or Co-op term 3. Other: _____ 	
2. EMPLOYMENT CONFIRMATION	
Firm Name:	
Street, City:	Province, Postal Code:
Employment start date (yyyy/mm/dd);	Employment end date, if applicable (yyyy/mm/dd):
If any of the time reported above was on a secondment, please indicate the following: Secondment start date (yyyy/mm/dd): _____ Secondment end date (yyyy/mm/dd): _____ Firm Name: _____ Firm Location: _____	



CPA

CHARTERED
PROFESSIONAL
ACCOUNTANTS
ATLANTIC
SCHOOL
OF BUSINESS

COMPTABLES
PROFESSIONNELS
AGRÉÉS
ÉCOLE DE
GESTION DE
L'ATLANTIQUE

3. CHARGEABLE HOURS SUMMARY		
Chargeable Hours	Hours	Secondment
Audit of historical financial information (minimum 625 hours)		
Review		
Other assurance engagements		
Total Assurance Procedures (minimum 1250 hours)		
Canadian Tax Services *		
Compilation Engagements		
Other (e.g., Hours in performance measurement, forensic accounting, research on the interpretation or application of accounting and assurance standards).		
Total hours		

* Chargeable Hours gained within Taxation in Assurance Engagements can be reported in either the “Other assurance engagements” or “Canadian Tax Services” categories.

4. CPA CANDIDATE CONFIRMATION	
I declare that all the information given in this form is true and correct.	
CPA Candidate Signature:	Date (YYYY-MM-DD)

Method of Submission:

Candidates must attach this completed form to the relevant experience report in PERT. Instructions on submitting an experience report in PERT, for assessment, can be found in the user guides contained within PERT.

Questions:

For questions on how to complete this form and/or how to complete/submit an experience report through PERT, please contact practicalexperience@cpaatlantic.ca.