

英國財務會計師公會香港分會

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## REQUEST FOR EXEMPTIONS

**IN ORDER TO CLAIM ANY EXEMPTIONS YOU ARE REQUIRED TO COMPLETE THE DETAILS BELOW.**

SURNAME ..... OTHER NAMES.....

ADDRESS.....

..... POSTAL CODE.....

TELEPHONE NO..... DATE OF BIRTH.....

QUALIFICATIONS.....

**DOCUMENTARY EVIDENCE WILL BE REQUIRED IF YOU ARE CLAIMING EXEMPTION(S) THROUGH QUALIFICATION(S)**

EMPLOYERS NAME.....

ADDRESS.....

..... POSTAL CODE.....

TELEPHONE NO..... FAX NO.....

LENGTH OF BUSINESS EXPERIENCE.....

PLEASE GIVE BASIC DETAILS OF YOUR DUTIES WITHIN THE ABOVE COMPANY:-

**YOU WILL BE NOTIFIED BY POST OF ANY EXEMPTIONS YOU ARE ELIGIBLE FOR.**