

**OKLAHOMA ACCOUNTANCY BOARD (“OAB”)
EXAMINATION INSTRUCTIONS AND INFORMATION FOR CANDIDATES**

Application Fee: A **\$75.00** application fee is due with each application, regardless of the number of sections for which you have applied.

Sections: Indicate the section(s) for which you are applying. You can select between one (1) and four (4) sections.

You will be required to **pay in full** for **ALL** sections selected before you will be able to sit for one.

Upon your first exam application NABSA will send an email prompting you to set up an account on their website using information contained in your initial candidacy approval email. NASBA will then send you a notification that your payment coupon for the fees required by NASBA, the American Institute of Certified Public Accountants (AICPA) and Prometric is ready to access. *(All of the test section fees are paid directly to NASBA.)*

The coupon will only be valid for ninety (90) days following its issuance. Once you have paid NASBA in full, they will send another notification informing you that your Notice-To-Schedule (NTS) is ready. At this point you can schedule both the time and place of your examination. The NTS will expire six (6) months following the date it was issued. You must indicate your preference for receiving the coupon and NTS.

Special Accommodations: If you have a disability according to the Americans with Disabilities Act, refer to the “ADA Request for Special Accommodations Form,” (ADA Form) which is available on the OAB’s website (www.ok.gov/oab) or by contacting the OAB office. You must submit supporting documentation of your diagnosis from a doctor for the initial accommodation approval. Every application submitted after initial approval does not need additional documentation. You must submit the ADA Form every time an examination application is submitted to the OAB.

Candidates are highly encouraged to read the CPA Candidate Bulletin, found at, <https://nasba.org/exams/cpaexam/>, for information regarding scheduling, re-scheduling, cancellations, and no-show policies.

CONTACT INFORMATION

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CANDIDATE EXAMINATION APPLICATION CERTIFIED PUBLIC ACCOUNTANT & PUBLIC ACCOUNTANT

Print your name and address below. If you have had a change in name or address please submit the corresponding "Change Reporting Form" found on the OAB website.

Answers marked with an "*" require additional information. See enclosed instruction sheet.

1. I am applying for the following section(s): AUDIT BEC FARE REG

2. Have any of the following events **ever** occurred that have not been previously reported to the OAB: (1) have you been arrested; (2) have you been charged with a crime or are any charges against you pending at this time; (3) have you pled guilty or nolo contendere to any charge(s); (4) have you been convicted of a crime? If yes to any of these questions please attach a written explanation. Yes No

3. Do you have a disability requiring accommodations to take the examination? (You must submit the "ADA Request for Special Accommodations Form") *Yes No

4. Instruct NASBA to send the Payment Coupon and NTS by: (mark only one) US Mail E-Mail

5. Upon my passing the CPA/PA examination, the Board may include my name, school, and degree in the list of successful candidates it sends to my college(s) or university(ies). Yes No

6. By signing below I hereby certify to the best of my knowledge that the information given in this application is true and correct and that I have not willfully omitted or suppressed any information which might have a bearing on the application.
 - I also certify that I have read the Oklahoma Accountancy Act and Title 10 of the Oklahoma Administrative Code and will hereafter comply with the provisions thereof.
 - I agree to comply with the uniform procedures governing the confidentiality of the nondisclosed examination.
 - I understand that if I am a party to any breach of confidentiality or examination security I will be subject to action by the Board which may affect my status as an examination candidate.
 - I authorize the Board to release to the National Association of State Boards of Accountancy (NASBA) such information as is necessary for my inclusion in the National Candidate Database, including but not limited to Social Security number and examination scores.
 - I understand that the Board's liability for any loss or claim resulting from the administration of the examination is limited to the amount of the current application fee paid.
 - I understand that OAB may obtain a background check as one method to ascertain criminal history and adherence to the Professional Code of Conduct.

7. _____ Date _____
Signature

8. _____
E-mail Address

BETWEEN APPLICATION FILINGS YOU MUST NOTIFY THE BOARD OF ALL CHANGES AFFECTING THE BOARD'S RECORDS BY: ONLINE UPDATE, MAIL, FAX (405) 521-3118, OR E-MAIL (okaccybd@oab.ok.gov).