**INSTITUTE OF SOLOMON ISLANDS ACOUNTANTS**

PROFESSIONAL DIPLOMA IN ACCOUNTING PROGRAM

APPLICATION FORM

**SECTION 1: PERSONAL DETAILS**

Surname……………………….. Given Names……………………………..

Male Female Date of Birth …../…./….

Country of birth………………… Citizenship…………………………

Address for correspondence Permanent home address

….…………………………….………. …………………………………………..

….……………………………………. ……….…………………………………..

……………………………………… ..…………………………………………..

Telephone (Mobile) Business Phone

….………………………………. ………………………………………

Email Contact…………………………………………… (Please print clearly)

**SECTION 2: EDUCATION AND QUALIFICATION**

Give details of your tertiary (higher education) studies and provide certified copies of your academic certificates.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year (s)** | **Name of qualification** | **College / University** | **Country** | **Year Completed** |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

**SECTION 3: EMPLOYMENT HISTORY**

Please provide brief details of previous employment or work placements. List these in chronological order.

|  |  |  |
| --- | --- | --- |
| Dates from/to  (DD/MM/YY | Name of Employer | Job Tile |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**SECTION 4: RECOMMENDATION**

List two referees (one character referee and one professional referee) and provide copies of letters supporting your application.

1. Name……………………………... 2. Name………………………………

Position…………………………… Position……………………………

Organization……………………… Organization………………………

Signature…………………………. Signature…………………………..

Email …………………………….. Email……………………………….

**SECTION 5: ISIA MEMBERSHIP**

Are you a current member of the Institute of Solomon Islands Accountants?

………………………………………..

If yes, indicate which membership category …………………………………

Membership number ………………………………

**SECTION 6: WRITING**

In not more than 500 words, please provide your personal and professional career aspirations and the reason why you believe that you should undertake this Diploma in Accounting course with the ISIA Scholarship.

**SECTION 7: DECLARATION**

I declare that the information I have supplied on this form is correct and complete, and the official academic records are a true copy of my academic results.

I understand that it is my responsibility to provide all documentation requested by the Institute of Solomon Islands Accountants (ISIA) to obtain, where necessary, any further information from the appropriate educational Institutions.

I understand that the Institute reserves the right at any stage to withdraw a scholarship which has been offered on the basis of incomplete or incorrect information.

Applicant’s signature………………………….. Date……………………….

**SECTION 8: CHECKLIST**

Please tick to indicate that all items had been completed and the required documentation has been attached/ enclosed with the application form.

(a) I have completed Sections 1-4

(b) Attached all certified copies of academic certificates.

(c) Attached two reference letters supporting your application.

**SECTION 9: Data Privacy Statement**

ISIA is committed to ensuring protection of all personal information that is provided for the purposes of this application. The personal data collected in this form will only be used for the purpose for which it is requested and will not be distributed to unauthorized parties for any other purpose.

**SECTION 10 OFFICIAL USE ONLY**

Date Received\_\_\_/\_\_\_/\_\_\_ Staff Initials:\_\_\_\_\_\_\_\_

Endorsed By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sign\_\_\_\_\_\_\_\_\_\_\_

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