



BICPA-FTMS Accountancy Academy Sdn Bhd

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ACCA COMPUTER BASED EXAMINATION (CBE) ENTRY FORM

A. CANDIDATE PARTICULARS

Name: Mr/Ms/Mrs _____

*Address: _____

*Tel: _____ (H) _____ (O) _____ (HP)

*E-mail Address: _____

*IC No/Passport No: _____ *Date of Birth: _____

*ACCA Registration No: _____

***Important and compulsory information. Please state accordingly.**

B. EXAMINATION

Examination Paper(s):

(Please tick the appropriate boxes and indicate the examination date and the time in the space provided)

FUNDAMENTIALS – Knowledge Level

F1 _____ F2 _____ F3 _____

C. PAYMENT / EXAMINATION FEES

Payment to be made by **CASH** or **CHEQUE**

Cheque payment to be made payable to **BICPA-FTMS Accountancy Academy Sdn Bhd.**

Student: **B\$195 each**

Non-Student: **B\$235 each**

Terms and Conditions of Enrolment:

- 1. Candidates are to comply with the examination schedule.*
- 2. Late registration will not be accepted under any circumstances.*
- 3. Examination fees will be forfeited if candidates fail to be present on the examination date registered.*
- 4. No refunds will be allowed once registration for the Examination has been confirmed.*

Enrolment and payment for the Examination date stated above:

Signature: _____

Date: _____

OFFICE USE ONLY

Date submitted: _____ Receipt No: _____ Amount: _____ Staff initial: _____