

Application for Registration as an Chartered Tax Adviser (CTA) Student 2019

Personal Details			
Title:Surname:		First Name:	
Address:			
Work Telephone Number:		Mobile Telephone Number:	
E-mail Address:			
(A VALID E-MAIL ADDRESS IS MANDATORY WHEN	ENROLLING AS A STUDENT)		
Where did you hear about the course	?		
Employment details			
Are you currently employed?	Yes	No	
Are you working in tax?	Yes	No	
Company name:			
Address:			
Which of the following describes you			
Big 4 / Small / medium practice / Lar	ge practice / Industry	/ / Other (please specify):	
Qualifications			
List the professional and academic q	ualifications held at I	evel 8 or above	
Qualification	Awardi	ing body	Year
	<u> </u>		
Have you previously registered as a student with the Irish Tax Institute? Yes No			
If yes, when?			
Data Protection			
Our Data Protection Policy, which can b	oo found at https://tavi	nstitute.ie/about-us/legal-and-data-policies	c/data protection policy
•		ristitute.ie/about-us/legal-and-data-policies xplains your rights in connection with you	
Fitness Declaration		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	p
	erve and comply with the	he rules and regulations of the Irish Tax In	stitute applicable to the
conduct of its members (including stud	lent members), includir	ng without limitation the rules set out in t	the Bye-Laws and in the Code
		with such rules both in the letter and in the duct tending to bring myself, the Irish Tax	
disrepute.			
I also declare that(a) I have not been convicted of an in	dictable offence other	than one prescribed by the Road Traffic A	1rts
		Institute any sum which has become pay	
(c) I have not, under any resolution of	creditors or order of a	ny court having jurisdiction or any deed o I been subject to an order of bankruptcy	r document, had my estate
discharged;	it of creditors, not have	Theen subject to an order of bankruptcy	Trom which an thou
(d) I am not disqualified by the High C	ourt from being a comp	pany director.	
Declaration			
		Tax Adviser (CTA) Course Informationand be bound by all decisions of the Education	
I have achieved the minimum education registration as a Student Member of the		ave enclosed a copy of my results to supp	port my application for
I certify that the information given is co	orrect.		
Signature		Date	



Application for Exemptions on the Part 2 Winter 2019 Course of the Chartered Tax Adviser (CTA)

Personal Details			
Title:	Surname:	First Name:	
E-mail Address:	<u> </u>		
(A VALID E-MAIL ADDR	RESS IS MANDATORY WHEN ENROLLING AS A		
Where did you he	ear about the course?		
Exemption d	etails		
My application fo	or a Group	exemption i	s based on the following:
I passed the final	l / qualifying examination of:		
Qualification		Awarding body	Year
		itute's Chartered Tax Adviser (CTA) Course Inf and regulations and agree to be bound by all d	
Education Com	mittee.		
I attach approp	riate proofs of entitlement t	o exemptions.	
I certify that th	e information given is correc	t.	
SignatureDate			
For office us	e only		
Student number			
Personal & Busin	ess Taxes Fundamentals	Approved for signing:	
Capital Taxes Fur	ndamentals	Signature:	
•	ng & Tax Accounting Fundament	als Date:	
Law Fundamenta			



Application for Registration on the Part 2 Winter 2019 Course of the Chartered Tax Adviser (CTA)

Personal Details		
Title:	Surname:	First Name:
F-mail Address:		
	ATORY WHEN ENROLLING AS A STUDENT	
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		and must be signed for. Please provide a shipping address if relevant:
Course materials will be de	suvered during office flours a	ind findst be signed for. Please provide a shipping address if relevant.
Employment detail	ls (if not submitted v	vith student registration form)
Fees paid by	Self	Employer
Are you currently employed	d? Yes	No
Are you working in tax?	Yes	No
Company name:		
Address:		
Which of the following desc	cribes your current employer	(circle as appropriate)
Big 4 / Small / Medium prad	ctice / Large practice / Indust	try / Other (please specify):
Course Details		
Please tick as appropriate:		
Full course		
Personal Taxes: Application	a & Interaction	
Business Taxes: Application	n & Interaction	
Indirect Taxes: Application 8	& Interaction	
Capital Taxes: Application 8	k Interaction	
Professional Skills		
Venue		
Dublin Onlin	e 🗌	

Examination Dataila		
Examination Details		
All venues are subject to availability and demand. Details will be posted on the student area of the Irish Tax Institute's website. Please tick both your first and second preference of venue. Students will be awarded their first preference where possible.		
Interim Exam and Professional Skills Assignment		
Please select the Continuous Assessment session you intend to present for:		
January 2020 Select Venue		
1st Preference: Dublin Cork		
2nd Preference: Dublin Cork		
June 2020 (Dublin Only)		
Examination		
Please select the Examination sitting you intend to present for:		
Summer 2020 Autumn 2020		
1st Preference: Dublin Cork		
2nd Preference: Dublin Cork		
Personal Taxes: Application & Interaction Indirect Taxes: Application & Interaction		
Business Taxes: Application & Interaction Capital Taxes: Application & Interaction		
If you decide to change your selected examination sitting after your examination number has issued for the Continuous Assessment or end-of-course examinations a €50 charge is payable.		



Application for Registration on the Part 2 Winter 2019 Course of the Chartered Tax Adviser (CTA)

Data Protection

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Fitness Declaration

I undertake that I shall at all times observe and comply with the rules and regulations of the Irish Tax Institute applicable to the conduct of its members (including student members), including without limitation the rules set out in the Bye-Laws and in the Code of Professional Conduct, and that I shall observe and comply with such rules both in the letter and in the spirit. I further undertake that I shall not, whether by act or by omission, engage in conduct tending to bring myself, the Irish Tax Institute or its members into disrepute.

I also declare that

- (a) I have not been convicted of an indictable offence other than one prescribed by the Road Traffic Acts
- (b) I am not more than six months in arrears in paying to the Institute any sum which has become payable by me to the Institute;
- (c) I have not, under any resolution of creditors or order of any court having jurisdiction or any deed or document, had my estate placed in liquidation for the benefit of creditors, nor have I been subject to an order of bankruptcy from which I am not discharged;
- (d) I am not disqualified by the High Court from being a company director.

Declaration

I have read and understand the Irish Tax Institute's Chartered Tax Adviser (CTA) Course Information & Regulations 2019/2020 including the Student Regulations and agree to be bound by all decisions of the Education Committee.

I hereby give notice that I wish to present myself for the Chartered Tax Adviser (CTA) Examinations. I have given the information required of me by the Education Committee.

I declare that the information given is correct. I acknowledge that making this Declaration falsely may result in my expulsion as a student from all or any courses organised by the Irish Tax Institute.

student from all or any courses organised by the Irish Tax Institute.	
Signature	_Date
Name (block capitals):	



Payment for registration on the Part 2 Winter 2019 Course of the Chartered Tax Adviser (CTA) Programme

Payment		
Name:		
	Fee	Total
All 4 modules	€1,715	
Cost per module	€550	
Student subscription	€235	
Delivery of course materials	€16	
Total		€
I wish to pay by:		
Direct Debit (com	npleted mandate attached)	
Cheque (mad	de payable to the Irish Tax Institute)	
Credit / Debit Card		
MasterCard Visa	Visa Debit	
Card No.:		Expiry Date:
Card Holder:		CVC :
Signature:		
For office use only:		
Student number:		
Approved for Education by:		