INSTITUTE OF FORENSIC ACCOUNTANTS

CICMA House 7 Kachia Road, Kaduna South
Kaduna, Nigeria
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+234 8023100067

Attach Two Passport Photograph

APPLICATION FOR MEMBERSHIP

I wish to apply for (Please tick the appropriate):

1. **Certified Forensic Accountants(CFA)** ☐ **$500.00**
2. **Certified Fraud Examiner(CFE)** ☐ **$500.00**
3. **Certified Financial Forensic (CFF)** ☐ **$500.00**
4. **Certified Financial Crime Specialist** ☐ **$600**
5. **Fellow Membership (FCFA)** ☐ **$1,000.00**

Title (Mr/Mrs/Miss/other): Surname----------

First Name----------Middle Name----------

Postal Address----------

Office Address----------

Date of Birth----------Marital Status----------

Nationality----------Phone----------

WhatsApp Number---------- E-mail: ----------

- **Make sure you attach your current C.V to this application form**

Academic Qualifications----------

Professional Qualifications----------

Job Position----------

Signature of Applicant

I agree to accept the decision of the Council as my eligibility for election to the appropriate grade of membership. If selected I agree to abide by the Institute's Charter and Bye-laws and to observe the provisions of the Institute's Code of Professional Standards. I confirm that the information supplied in support of my Application for membership is correct. I agree that all fees paid are nonrefundable.

Signature: ---------- **Date:** ----------

1. Fees are payable into the institute bank account number 0013525018 at Access Bank Plc

2. Scan your completed form with the originals of your credentials to ifa.nig@gmail.com and sent the hard copies of your form to the institute by courier service

***Pay the membership fees by online funds transfer to the institutes bank account using these details: 1. Name of Bank: Zenith Bank Plc,**

2. Bank Address: 7 Kachia Road, Kaduna South, Kaduna, Nigeria

3. Account Name: Institute of Cost and Management Accountants. 4. Account Number: 5072884866 5. Swift Code: ZEIBNGLA