



**APPLICATION FOR RENEWAL OF PRACTISING CERTIFICATE**

I wish to submit my application for renewal of practicing certificate for the year \_\_\_\_\_.

My details are as follows:

**NAME** : .....

**BUSINESS NAME** : .....

.....

**PHYSICAL ADDRESS** : .....

.....

**E-MAIL ADDRESS** : .....

**TELEPHONE** : .....

**REMITTANCE** : .....

**SIGNATURE** : ..... **DATE:** .....

**21 HOURS OF VERIFIABLE CPD IS REQUIRED TO RENEW PRACTISING CERTIFICATES.**

**Please attach the following:**

- 1. Copy of residence & work permit.**
- 2. Copy of Professional Indemnity Insurance.**
- 3. CPD Returns for the year ended 31-12-2014**
- 4. CPD Evidence Summary for 2014**
- 5. Solemn declaration – CPD.**
- 6. Solemn declaration – Resident of Botswana for the past year.**
- 7. Details of Continuity of Practice – Sole Practitioners.**

*In terms of the provisions of the Accountants Act, 2010 and the Rules and Regulations of the Institute, the Practising Certificate is valid up to 31<sup>st</sup> day of December of each year. Applications received after 31-12-2014 would be subject to 100% penalty fee.*