# OKLAHOMA ACCOUNTANCY BOARD ("OAB") TRANSFER OF CREDIT INSTRUCTIONS AND APPLICATION

#### INFORMATION FOR APPLICANTS TRANSFERING ONE (1) TO FOUR (4) EXAMINATION CREDITS

Citations refer to the Oklahoma Accountancy Act ("Act") and the Oklahoma Administrative Code ("Code"), which are available on the OAB's website.

**Eligibility to Apply:** All educational requirements to qualify must be met at the time the application is filed with the OAB. The OAB cannot waive any of the eligibility requirements.

Applicants may be asked to substantiate to the satisfaction of the OAB that they are residents of Oklahoma as required by Section 15.8.A of the Act. Former or future residence in the State of Oklahoma is not considered.

Affidavit Verifying Lawful Presence in the United States: All applicants submitting a qualification application must also <u>submit the notarized</u> affidavit form showing proof of lawful residence inside the United States.

**Transfer of Credit Fee:** <u>A \$235\* fee is required with the application</u>. (\*The Oklahoma Accountancy Board will perform an Oklahoma State Bureau of Investigation criminal history search on all applicants. The applicant is responsible for the \$15 cost of the background check. Transferring credits - \$145, Application Processing Fee - \$75, Criminal History Check - \$15, for a total of \$235)

**Requirements to Qualify for Transfer of Credits (Section 10:15-18-13 of Code):** Requires that you meet the Oklahoma education requirements and have passed section(s) of the examination in the same manner as an Oklahoma candidate.

**Interstate Exchange of Information Form:** This form is essential to your application. Before your application will be accepted for processing you must have certain information verified by the board of accountancy in the state where you took the Uniform CPA Examination. Please complete the initial portion of this form and forward it to the board of accountancy where examination credits and/or status as a CPA were first established. That board will then complete the remainder of this form (Section A-C) and return the form to you so you may file it as a part of your application. You may wish to check with the other board before forwarding this form to determine whether they have additional requirements or a fee for processing this request. Any fee must be paid by the applicant. You can access this form here.

**Notification of Eligibility:** If you are found eligible to transfer your examination credits into Oklahoma, you will receive an approval letter via email that will contain instructions on the next steps. If you are found ineligible, you will receive a letter via email explaining why you are not eligible.

An answer that has an "\*" next to it requires a detailed, signed letter of explanation or copy of documents.

eScrips: Must be sent directly from the University to the Examination Coordinator at the OAB office to be official.

#### EDUCATION

To Qualify to Sit for Exam: You must submit sufficient official transcripts to reflect:

- (1) a minimum of 120 semester hours of college education including a baccalaureate or higher degree.
- (2) a minimum of 24 semester hours of accounting course credits above principles of accounting or introductory accounting, including at least one auditing or assurance course (not internal auditing); and
- (3) a minimum of 9 semester hours of upper division-level related course credit in any or all the subjects of economics, statistics, finance, marketing, management, business law, business communication, financial information systems and computer science.

To Qualify for a CPA Certificate: After you pass the exam, you must complete the following before you can apply for certification:

- (1) an additional 30 semester hours for a total of 150semester hours of college education.
- (2) an additional six (6) hours of accounting course credits for a total of 30 hours of accounting above principles of accounting or introductory accounting.

If you apply for eligibility to sit for the exam with 120 semester hours, you will be required to submit your additional transcripts to prove all semester hours have been earned when you apply for certification after passing the exam.

**Graduate Level Accounting Courses**. Graduate level Financial and Managerial Accounting only, do not count toward the required 30 semester hours of accounting if they are equivalent to undergraduate principles.

Each Course Needed To Qualify Must Be Individually Listed On An Official Transcript. If you attended more than one college or university, you must furnish an official transcript from each one to establish your eligibility.

**Repeated Courses**: If you repeated a course or took one that is equivalent to the same course at another college, the OAB will count the course the first time you earned credit.

**Quarter-Hour Credits:** When using a two-thirds conversion to convert quarter hours earned into semester hour credit the OAB does not round up course credit.

**Education Outside the United States:** If all or part of your education toward your eligibility was from a college outside the United States, it will be necessary to have your education evaluated by NASBA International Evaluation Services (NIES). NIES will charge you a fee for the evaluation, and it can take two to three months for some evaluations to be complete. Your application will be considered incomplete and cannot be processed if the evaluation is not included. You may visit our website at www.ok.gov/oab under Examination, Foreign Education Information, for details regarding NIES.

#### **CONTACT INFORMATION**

Symone Chambers Examination Coordinator schambers@oab.ok.gov (405)522-0322

File No.\_\_\_\_



Ashley Plyushko, CPA Executive Director OKLAHOMA ACCOUNTANCY BOARD 201 NW 63<sup>rd</sup> Street, Suite 210 Oklahoma City, OK 73116 Phone: (405) 521-2397 Fax: (405) 521-3118 www.oklahoma.gov/oab

# CERTIFIED PUBLIC ACCOUNTANT APPLICATION FOR ELIGIBILITY TRANSFER OF ONE (1) TO FOUR (4) CREDITS

Answers marked with an "\*" require additional information. PRINT IN INK OR TYPE ALL INFORMATION

### The attached instructions are an important element to completing the application.

I hereby make the following declarations in connection with this application:

1. Full Name:						
	(First)	(Middle Name)	(Last)	(Lineage i.e. Sr., Jr.)		
2. Mailing Address:						
21 1141119 / 4410001	(Number and	Street or PO Box)	(City and State)	(Zip Code)		
3. Daytime Telepho	ne:( )_		Home Telephone	e: ( )		
4. Date of Birth: Email address:						
5. Social Security N	umber:		Gender:	Male Female		
6. Mother's Maiden	Name:					
7. I am applying to t	ransfer (# of c	credits from: redits)				
<ul> <li>website here.</li> <li>You will have applicant, can</li> <li>Sometimes ot</li> <li>If the state you</li> </ul>	the state your t submit it to us. her Boards will	ransferring credits from have their own form the ng from was handled thr	complete the form. The y prefer to use. We will	ion. This form can be found on our ey can send to us directly or you, the accept those as well. equest a Candidate Score Summary		
	-	RESID	ENCE			
8. Are you a United	States Citizer	? Yes	No			
9. a.) Are you in th	e United State	es on a Visa status?	Yes (SUBMI	Γ СОРΥ) 🗌 Νο		
b.) If "yes" indic	ate type of vis	a (SUBMIT COPY):				
	anent Resider mmigrant/Ten		Student visa Other type of visa: _			
c.) Visa Status	expires ( <b>SUBI</b>					
-1-						

<ul> <li>11. Beginning date of uninterrupted Oklahoma residence: Month Day Year</li> <li>12. Are you employed in the state of Oklahoma? Yes No</li> <li>If no, in what state are you employed?</li> <li>13. To what state do you pay state income tax?</li> <li>14. Are you in military service? Yes No</li> </ul>						
If no, in what state are you employed?						
13. To what state do you pay state income tax?						
14. Are you in military service?						
<b>STATUS - EDUCATION</b> 15. How many semester hours have you completed as of this application: 120 150						
<ul> <li>The education requirements to sit for the exam are:</li> <li>Bachelor's degree from a four-year college or university accepted by the Board</li> <li>120 semester hours</li> <li>24 semester hours in accounting above the principles including an external auditing course</li> <li>Nine (9) semester hours in upper-division (3000 level or above) business related courses</li> </ul>						
<ul> <li>The education requirements for CPA licensure are:</li> <li>30 additional semester hours for a total of 150 semester hours</li> <li>Six (6) additional accounting hours for a total of 30 semester hours in accounting above the principles including an external auditing course</li> </ul>						
You will be required to have the education requirements for licensure met before you can apply for licensure after you pass the exam. Once you pass the exam your credits will not expire. They are locked in						
<b>STATUS - EMPLOYMENT</b> (Future information is not needed, state status as of the date signing the application)						
16. a.) Check only one: Student Unemployed Employed/self employed						
b.) Date startedMODAYYR <b>PRESENT</b> (date of signing the application)						
c.) If employed or self-employed:						
Business name:						
Business address:						
PHOTOGRAPH						
17. One 2 X 2 passport type photograph. TAPE HERE						
ONE RECENT 2 X 2 PASSPORT TYPE PHOTOGRAPH						
-2-						

### DISCLOSURE

	DIGGEOGORE				
In answering the questions below, the individual shoul other acts classified under state law as criminal (minor that has caused a professional credential or license to	traffic violation excluded). In addition, you sho				
If the answer to the moral question is "yes" but is ar application.	nswered "no" and the individual signs the atte	estation, the individual has filed a fraudulent			
The OAB obtains background checks. The first one is you have not provided the required explanation and c					
	CRIMINAL				
<ol> <li>Have any of the following events ever you been arrested; (2) have you been time; (3) have you pled guilty or nolo co yes to any of these questions, attach a should allow you to sit for the examination</li> </ol>	charged with a crime or are any contendere to any charge(s), (4) have signed letter of explanation of the e	charges against you pending at this ve you been convicted of a crime? <u>If</u> event(s) that occurred, why the Board			
19. Have you ever been denied the right to By which jurisdiction(s):					
20. Have you ever had a CPA certificate of revoked or suspended or have you ever By which jurisdiction(s):	er had an annual permit/license re	<b>U</b>			
21. Have you <b>ever</b> had any professional c yes, attach a written explanation *Y		spended by enforcement action? If			
APPLICANT'S ATTESTATION					
<ul> <li>not willfully omitted or suppressed any</li> <li>I also certify that I have read the Oklah hereafter comply with the provisions th</li> <li>I authorize the Board to release to the N is necessary for my inclusion in the Nat examination scores.</li> <li>I understand that the Board's liability fo the amount of the current examination</li> </ul>	National Association of State Boards of Acc ional Candidate Database, including but no r any loss or claim resulting from the admir	n the application. Oklahoma Administrative Code and will countancy (NASBA) such information as ot limited to Social Security number and histration of the examination is limited to			
MUST SIGN AND DATE					
22. Print your name	Sign your name	Date			
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OKLAHOMA ACCOUNTANCY BOARD							
AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES							
Affidavit of:							
Affidavit of:							
STATE OF )							
COUNTY OF )							
l,(Applicant's Name)	, of lawful age, being first duly sworn upon his or her oath, states under penalty of perjury, as follows:						
(Applicant's Name)	states under penalty of perjury, as follows.						
Initial one Option below:							
	Ottime washing the second black and Ota table Ottimes						
Option 1 – Verification of U.S. C	Citizenship: I am a United States Citizen.						
	lified Alien Status: I am a qualified alien under the federal n Act, and am lawfully present in the United States. My on:						
(Signature of Applicant) To Be Completed By Notary:		-					
Subscribed and sworn to or affirmed before	ore me this day of, 20, by						
(Applicant's Name)							
	NOTARY						
	(Seal)						
My Commission Expires:							
My Commission Number:							