

Please return completed form to [PDPA@cpawsb.ca](mailto:PDPA@cpawsb.ca)

## APPLICANT INFORMATION

Date Completed:

<b>First Name:</b>	<b>Last Name:</b>	<b>Preferred Name:</b>	<b>Mr./Ms.</b>	<b>Date of birth</b>
<b>Residency Status:</b>				
<b>Canadian Citizen</b>		<b>Permanent Resident</b>		<b>Temporary Resident</b>
<b>CPA Provincial Governing Body:</b>			<b>CPA Canada Member/Customer Number:</b> (Consists of the letter 'C' followed by a series of numbers. i.e. C123456)	
<b>Preferred Address</b>				
<b>Home</b>			<b>Business</b>	
<b>Street:</b>	<b>City:</b>	<b>Province:</b>	<b>Postal Code:</b>	
<b>Telephone:</b>			<b>Email:</b>	
<b>Business Name (if applicable):</b>				

## PROVISION OF CONSENT

*The personal information you provide on this form is collected by CPAWSB on behalf of the provincial CPA body you select and will be used by CPAWSB to create your My CPA profile and communicate with you about the PDPA education and exams. The personal information you provide will be used by the provincial CPA body to: verify your eligibility to enroll in the PDPA, administer your participation in the PDPA, and if you are ultimately successful, assess your eligibility for public practice licensure.*

You can view privacy policies and contact information of the provincial CPA bodies at [www.cpawsb.ca/privacy](http://www.cpawsb.ca/privacy).

I consent to the above.

**YES**

**NO**

From time-to-time, the CPA Western School of Business (CPAWSB) and the provincial CPA bodies send commercial electronic messages, such as invitations to events or information about CPA education programs and the CPA profession to students, candidates, and other people who are not enrolled in those programs. Select below to receive commercial electronic messages from CPAWSB and/or my provincial CPA body. You can withdraw your consent to receive commercial electronic messages at any time.

**YES**

**NO**

By submitting this registration form, I agree to all terms outlined in the [CPA Harmonized Education Policies Vol. 2](#)

**YES**

**NO**

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## MODULE PREFERENCE (optional)

Please indicate your preferred module choice, including session:

## WORKSHOP AND EXAMINATION LOCATIONS

### Workshop Locations\*

- Burnaby
- Calgary
- Edmonton
- Kelowna
- Regina
- Saskatoon
- Vancouver
- Victoria
- Winnipeg

### Exam Locations\*

- Abbotsford
- Burnaby
- Brandon
- Calgary
- Cranbrook
- Edmonton
- Fort McMurray
- Fort St. John
- Grande Prairie
- Hannah
- Lethbridge
- Lloydminster
- Iqaluit
- Kamloops
- Kelowna
- Medicine Hat
- Nanaimo
- Peace River
- Prince George
- Red Deer
- Regina
- Saskatoon
- Vancouver
- Victoria
- Whitehorse
- Winnipeg
- Yellowknife

\*These details are provided for information purposes only and are subject to change. Workshop and examination preferences must be indicated in the My CPA Portal at time of module registration