

# APPLICATION FORM

## SHORT COURSES & QUALIFYING EXAMINATION



**I wish to enrol for the following short courses pending the outcome of possible exemptions I might receive from the ICFP:**

Commercial Forensic Accounting - CFA

Commercial Forensic Investigation - CFI

Commercial Forensic Practice and Fraud Risk Management - PFRM

Commercial Forensic Information Technology - CFIT

Commercial Forensic Law - CFL

<b>ICFP Membership:</b>	Associate Member	Non Member	
Do you wish to become a member of the ICFP:	Yes	No	Not applicable
If yes, do you wish to apply for exemptions for prior learning:	Yes	No	Not applicable
<b>Indicate the short courses in respect of which you wish to apply for exemption:</b>			
Commercial Forensic Accounting - CFA		Commercial Forensic Information Technology - CFIT	
Commercial Forensic Investigation - CFI		Commercial Forensic Law - CFL	
Commercial Forensic Practice and Fraud Risk Management - PFRM			

### Particulars of applicant

Surname:

Names:

Initials:

Title:

ID number

Cell no.:

Tel (h):

Tel (w):

Fax no.:

E-mail:

Postal address:

Code:

Physical address:

Code:

Work address:

Code:

### Professional details

Employer:

Years experience:

Portfolio:

(job description)

Tertiary Qualification:

Institution:

Year obtained:

**Payment details:** Cost: R10 750 per short course, 50% deposit payable by 30 April 2022 and the balance by 31 August 2022. Banking detail: Account holder: NWU; Bank: ABSA; Acc no 0670 642 313, Branch code: 632 005  
**Reference:** Initials, Surname and course code. Please email proof of payment to: [pfa@nwu.ac.za](mailto:pfa@nwu.ac.za)  
For attention: **Forensic Course Administrator.**

<b>Method of Payment</b> (Please mark appropriate box, No cash will be accepted)	
Electronic Transfer	Direct debit

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

**Required documentation to be submitted:**

1. Certified copy of Matric Certificate
2. Certified copies of Tertiary Qualifications
3. Copy of ID
4. ID photo (Electronic format accepted in Windows compatible formats)
5. Curriculum vitae (short description of work experience)

**Signature of applicant**

**Completed form to be submitted to [pfa@nwu.ac.za](mailto:pfa@nwu.ac.za)**

# APPLICATION FORM

## QUALIFYING EXAMINATION ONLY



Please note: This application form should be completed should you **only wish** to enrol for the different modules of the ICFP **Qualifying Examination**, but not the preparatory courses thereto.

**I wish to enrol for the following modules of the qualifying examination pending the outcome of possible exemptions I might receive from the ICFP:**

Commercial Forensic Accounting - CFA

Commercial Forensic Investigation - CFI

Commercial Forensic Practice and Fraud Risk Management - PFRM

Commercial Forensic Information Technology - CFIT

Commercial Forensic Law - CFL

### ICFP Membership:

Associate Member

Non Member

Do you wish to become a member of the ICFP:

Yes

No

Not applicable

If yes, do you wish to apply for exemptions for prior learning:

Yes

No

Not applicable

**Indicate the modules in respect of which you wish to apply for exemption:**

Commercial Forensic Accounting - CFA

Commercial Forensic Investigation - CFI

Commercial Forensic Practice and Fraud Risk Management - PFRM

Commercial Forensic Information Technology - CFIT

Commercial Forensic Law - CFL

## Particulars of applicant

Surname:

Names:

Initials:

Title:

ID number

Cell no.:

Tel (h):

Tel (w):

Fax no.:

E-mail:

Postal address:

Code:

Physical address:

Code:

Work address:

Code:

## Professional details

Employer:

Years experience:

Portfolio:

(job description)

Tertiary Qualification:

Institution:

Year obtained:

**Payment details:** Cost: R4 200 per short course, 50% deposit payable by 30 April 2022 and the balance by 31 August 2022. Banking detail: Account holder: NWU; Bank: ABSA; Acc no 0670 642 313, Branch code: 632 005  
**Reference:** Initials, Surname and course code. Please email proof of payment to: [pfa@nwu.ac.za](mailto:pfa@nwu.ac.za)  
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Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

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**Signature of applicant**

**Completed form to be submitted to [pfa@nwu.ac.za](mailto:pfa@nwu.ac.za)**