



Your proposer and seconder must be people you have worked for in the past or are currently working for. They must have direct knowledge of your work - ideally your manager - and have been in a more senior position than you. Together they must be able to verify at least 36 months of the relevant practical experience that appears on your extended CV, including 18 months in the core area. Neither your proposer or seconder needs to be a member of CIMA, nor do they need to be a qualified accountant. Your practical experience cannot be verified by a relative.

**Proposer** CIMA Contact ID (if applicable)  -

Name of proposer

Qualifications/ designatory letters

Current job title

Company/ Organisation name and address

Current contact telephone number

Employment during which you acquired direct knowledge of the applicant's work experience (name of company/organisation)

**Declaration**  
 I certify that the applicant named overleaf was responsible to me during the whole period (right), that the content of their job(s) was as stated in the CP/RPE attached, and that their work performance was satisfactory during that period. I hereby testify to the general good character of the applicant. I confirm that I am not a relative of the applicant.  
 Other remarks (optional)

From (date)  /  /

To (date)  /  /

Signed  Date  /  / 20

**Seconder** CIMA Contact ID (if applicable)  -

Name of seconder

Qualifications/ designatory letters

Current job title

Company/ Organisation name and address

Current contact telephone number

Employment during which you acquired direct knowledge of the applicant's work experience (name of company/organisation)

**Declaration**  
 I certify that the applicant named overleaf was responsible to me during the whole period (right), that the content of their job(s) was as stated in the CP/RPE attached, and that their work performance was satisfactory during that period. I hereby testify to the general good character of the applicant. I confirm that I am not a relative of the applicant.  
 Other remarks (optional)

From (date)  /  /

To (date)  /  /

Signed  Date  /  / 20

# Current Employment Details

Job title

Company name

Department

Nature of business

Address

Town/City

County/State

Country

Post code/  
Zip code

Country code

Area code

Phone number

Extension

Switchboard

Company fax

Email

@

CIMA Training  
reference number  
(if applicable)

Membership of other professional  
bodies (with dates obtained)

## Remittance Advice



Chartered Institute of  
Management Accountants

Name

CIMA ID

Tick one only

Sterling cheque

Sterling bank draft

UK postal order

Amount due £

Voluntary donation to the Benevolent Fund £

Amount enclosed £

CIMA takes Data Protection and card security very seriously. For this reason, if you wish to pay by card, please go online at [www.cimaglobal.com/mycima](http://www.cimaglobal.com/mycima) Alternatively, you can send us a Sterling cheque or draft drawn on a UK bank. Under no circumstances should you send in your card details by post or email.

Warning: if you do not enclose this Remittance Advice with payment, there will be a delay in updating your record.

## Making your Assessment of Practical Experience/Membership Application - some points to remember;

- > Please read your Practical Experience Requirements guide before completing your application.
- > Please choose EITHER the CP or the RPE route - we cannot assess a mix of the two formats as the experience requirements are different. Please note: this application can be used for either method of application but please ensure that all other forms are appropriate for the format you choose.

Have you included everything? Please use the checklist below to make sure we have everything we need:

- |  | Please tick              |
|--|--------------------------|
| • Assessment of practical experience/membership application form, including current employment details signed and dated.   | <input type="checkbox"/> |
| • Proposer and Seconder have signed, dated and fully completed their sections. Original signatures must be provided. Scanned or faxed copies cannot be accepted.   | <input type="checkbox"/> |
| • Employment Summary is fully completed up to the current date, with your experience broken down into the number of months in each area. Note: Please take care not to double count your experience. The number of months experience claimed across the basic, core and supplementary areas must not be greater than the number of months spent in the role. | <input type="checkbox"/> |
| • CP Route: the experience verified by your proposer and seconder covers three years between them. Additional signature/references enclosed if necessary.  | <input type="checkbox"/> |
| • CP Route: your extended CV describing your relevant work experience is enclosed.   | <input type="checkbox"/> |
| • Enclosed the appropriate fee / have a direct debit mandate with the Institute.   | <input type="checkbox"/> |
| • Record of skills development.  | <input type="checkbox"/> |

Please send your completed application form to :

Practical experience/Membership application  
Learning Support  
CIMA  
26 Chapter Street  
London SW1P 4NP  
UK

\*Please ensure that you keep a copy of your application for future reference

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