

# Request for Verification of Certificate/License and CPA Exam Grades



Office of the Secretary of the State  
Connecticut State Board of Accountancy  
Form **SBA-007** (Rev. 2/17/15)



**Instructions for Board of Accountancy:** Please complete this request for verification and return it in a sealed envelope to the Applicant.

### Instructions for Applicant:

Examination grades must be transferred from the jurisdiction in which the examination was taken. Submit this form to the State Board that issued your original certificate/license. Be sure to include any fee required.

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's name: \_\_\_\_\_  
Type or print your name

Applicant's address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Social Security number XXX-XX-\_\_\_\_

Birth Date \_\_/\_\_/\_\_\_\_

The applicant holds an original certificate as a Certified Public Accountant.

Certificate Number \_\_\_\_\_ Date issued \_\_\_\_\_

License Number \_\_\_\_\_ Date issued \_\_\_\_\_

He/she is \_\_\_\_\_ is not \_\_\_\_\_ currently registered to practice.

If this individual's Certificate or License has been suspended, revoked or action has been taken against it please give the reason (You may submit supplemental documentation):

\_\_\_\_\_  
\_\_\_\_\_

