



Chartered Professional Accountants of Ontario  
69 Bloor Street East Toronto ON M4W 1B3  
T. 416 962.1841 Toll free 1 800 387.0735  
[cpaontario.ca](http://cpaontario.ca)

## Application for Admission to Membership – Referee’s Recommendation 1

You have been asked to provide a character reference for the below-named applicant for admission to membership. Please complete and return this form to the applicant who will submit this form with his/her online application. CPA Ontario may contact you to verify the information provided on this form.

Print applicant’s name:

I attest that:

I am a member in good standing of: \_\_\_\_\_ and \_\_\_\_\_  
(name of accounting body)

hold the accounting designation(s): \_\_\_\_\_  
(list all designations issued by the accounting body named above)

I am not related to the applicant.

I have known the applicant for the following duration (in years):

True    False

I have found this applicant to be of good character; and

I know of no reason why membership in CPA Ontario should not be granted.

Please add below any comments which you believe would help in evaluating the applicant’s request for membership:

Full name of referee (please print):

Member No.:

Full Mailing Address:

X \_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date (mm/dd/yyyy)



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## Application for Admission to Membership – Referee’s Recommendation 2

You have been asked to provide a character reference for the below-named applicant for admission to membership. Please complete and return this form to the applicant who will submit this form with his/her online application. CPA Ontario may contact you to verify the information provided on this form.

Print applicant’s name:

I attest that:

I am a member in good standing of: \_\_\_\_\_ and \_\_\_\_\_  
(name of accounting body)

hold the accounting designation(s): \_\_\_\_\_  
(list all designations issued by the accounting body named above)

I am not related to the applicant.

I have known the applicant for the following duration (in years):

True    False

I have found this applicant to be of good character; and

I know of no reason why membership in CPA Ontario should not be granted.

Please add below any comments which you believe would help in evaluating the applicant’s request for membership:

Full name of referee (please print):

Member No.:

Full Mailing Address:

X \_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date (mm/dd/yyyy)