CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption from Continuing Professional Education

I hereby request an exemption from the Texas State Board of Public Accountancy's mandatory continuing professional education requirement according to Board Rule §523.112 (Required CPE Participation) for the twelve-month period:

_________________________ through ___________________________
(dates for which the exemption is being requested)

I have circled the exemption below which applies to my situation and will complete the appropriate exemption form, and also submit written documentation as specified in the exemption.

A. I am not employed, and I will provide the information required for Exemption A.

B. I am employed, and have no association with accounting. I will describe my work-related duties as required for Exemption B.

C. I am claiming an exemption as an out-of-state licensee, and I will provide the information required for Exemption C. I do not service Texas clients from out of state.

D. I am claiming an exemption for reasons of health or disability, and I will provide the information required for Exemption D. I will submit a statement from my physician disclosing the extent of my disability. I understand that a disabled person is one who is unemployed due to the disability.

E. I am claiming an exemption due to active military duty, and I will provide the information required for Exemption E. I will submit a copy of my military orders.

F. I have extenuating circumstances that prevent compliance, and I will provide the information required for Exemption F. I will disclose all pertinent information.

I understand the decision of the Board is final and should the exemption be denied, I will be required to accrue and report continuing professional education according to Board Rule §523.112 (Required CPE Participation). An issued license card will be the acknowledgment of an approved exemption request.

_____________________________________________  __________________________________________
Licensee's Name                                                  Certificate Number

Complete Mailing Address

COMPLETE AND RETURN WITH THE APPROPRIATE EXEMPTION FORM
CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption A

My name is ____________________________, I am of sound mind, capable of making this affidavit, and personally acquainted with the facts stated herein.

I hold Texas State Board of Public Accountancy certificate number ____________ which was issued on ______________________, which certifies me as a certified public accountant in the State of Texas.

Pursuant to Board Rule §523.113(1)(A) (Exemptions from CPE), I am not employed and as such, I believe that I am eligible to be exempted by the Board from the continuing professional education requirements of the Board.

I recognize that should I receive the exemption, but subsequently change my status, I must accrue the minimum number of required credits of continuing professional education for the period of my exempt status. The CPE credits shall be accrued from the technical area as described in Board Rule §523.102 (CPE Purpose and Definitions) and Board Rule §523.130 (Ethics Course Requirements).

I understand that the decision of the Board is final and should the exemption be denied, I will be required to accrue and report Continuing Professional Education according to Board Rule §523.113(1)(A) (Exemptions from CPE).

I certify that the information provided for the Affidavit for Exemption from Continuing Professional Education is true and correct to my knowledge.

Affiant's Signature

Affiant's Name (printed)
CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption B (part 1 of 2)

My name is ___________________________. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts stated herein.

I hold Texas State Board of Public Accountancy certificate number __________ which was issued on ______________________, which certifies me as a certified public accountant in the State of Texas.

Pursuant to Board Rule §523.113(1)(B) (Exemptions from CPE), I have no association with accounting and as such, I believe that I am eligible to be exempted by the Board from the continuing professional education requirements of the Board. The term “no association with accounting” includes the following:

I do not work, provide oversight of accounting, or supervise work performed in the areas of financial accounting and reporting; tax compliance, planning or advice; management advisory services; accounting information systems; treasury, finance, or audit.

I do not represent to the public, including an employer, that I am a CPA or public accountant in connection with the sale of any services or products involving professional accounting services as defined in the Rules of Professional Conduct, §501.52(22), including such designation on a business card, letterhead, proxy statement, promotional brochure, advertisement, or office.

I will not offer testimony in a court of law purporting to have expertise in accounting and reporting, auditing, tax, or management advisory services.

I will not provide instruction in accounting courses.

My job title is _____________________________.

My duties are _____________________________.

_____________________________________

_____________________________________

_____________________________________.

TSBPA FORM L0001
(Rev 04/2017)
Page 3 of 8
CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption B (part 2 of 2)

I do/do not (circle one) have a supervisor. I understand that in the event that I do have a supervisor, my supervisor must verify my description of my job duties by signing below.

Supervisor’s Signature

Supervisor’s Name (printed)

Supervisor’s Phone

Supervisor’s Email

I recognize that should I receive the exemption, but subsequently change my status, I must accrue the minimum number of required credits of continuing professional education for the period of my exempt status. The CPE credits shall be accrued from the technical area as described in Board Rule §523.102 (CPE Purpose and Definitions) and Board Rule §523.130 (Ethics Course Requirements).

I understand that the decision of the Board is final and should the exemption be denied, I will be required to accrue and report Continuing Professional Education according to Board Rule §523.113(1)(B) (Exemptions from CPE).

I certify that the information provided for the Affidavit for Exemption from Continuing Professional Education is true and correct to my knowledge.

Affiant’s Signature

Affiant’s Name (printed)
CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption C

My name is __________________________. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts stated herein.

I hold Texas State Board of Public Accountancy certificate number ______________ which was issued on ____________________, which certifies me as a certified public accountant in the State of Texas.

Pursuant to Board Rule §523.113(1)(C) (Exemptions from CPE), I am not a resident of the State of Texas, and as such, I believe that I am eligible to be exempted by the Board from the continuing professional education requirements of the Board.

I am a resident of __________________________ and I do not serve Texas clients.

I recognize that should I receive the exemption, but subsequently change my status, I must accrue the minimum number of required credits of continuing professional education for the period of my exempt status. The CPE credits shall be accrued from the technical area as described in Board Rule §523.102 (CPE Purpose and Definitions) and Board Rule §523.130 (Ethics Course Requirements).

I understand that the decision of the Board is final and should the exemption be denied, I will be required to accrue and report Continuing Professional Education according to Board Rule §523.113(1)(C) (Exemptions from CPE).

I certify that the information provided for the Affidavit for Exemption from Continuing Professional Education is true and correct to my knowledge.

________________________________________
Affiant’s Signature

________________________________________
Affiant’s Name (printed)
CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption D

My name is _________________________________. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts stated herein.

I hold Texas State Board of Public Accountancy certificate number ______________ which was issued on ______________________, and which certifies me as a certified public accountant in the State of Texas.

Pursuant to Board Rule §523.113(1)(D) (Exemptions from CPE), I am not able to comply with the continuing professional education requirements for the health reasons described below, and as such, I believe that I am eligible to be exempted by the Board from the continuing professional education requirements of the Board. I am attaching a statement from my physician disclosing the extent of my disability.

My disability began on or about ______________ and is likely to continue in the foreseeable future.

My physical limitation(s) is/are: __________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Weatherby’s Signature                              Weatherby’s Name (printed)

Weatherby’s Address (printed)

Weatherby’s Phone                                    Weatherby’s Email

I recognize that should I receive the exemption, but subsequently change my status, I must accrue the minimum number of required credits of continuing professional education for the period of my exempt status. The CPE credits shall be accrued from the technical area as described in Board Rule §523.102 (CPE Purpose and Definitions) and Board Rule §523.130 (Ethics Course Requirements).

I understand that the decision of the Board is final and should the exemption be denied, I will be required to accrue and report Continuing Professional Education according to Board Rule §523.113(1)(D) (Exemptions from CPE).

I certify that the information provided for the Affidavit for Exemption from Continuing Professional Education is true and correct to my knowledge.

________________________________________________________________________

Affiant’s Signature                              Affiant’s Name (printed)
CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption E

My name is __________________________. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts stated herein.

I hold Texas State Board of Public Accountancy certificate number ___________ which was issued on ______________________, which certifies me as a certified public accountant in the State of Texas.

Pursuant to Board Rule §523.113(1)(E) (Exemptions from CPE), I am on extended active military duty. I understand that I must not practice public accountancy during the year for which the exemption is granted and as such, I believe that I am eligible to be exempted by the Board from the continuing professional education requirements of the Board. I am attaching a copy of orders to active military duty to this affidavit.

I recognize that should I receive the exemption, but subsequently change my status, I must accrue the minimum number of required credits of continuing professional education for the period of my exempt status. The CPE credits shall be accrued from the technical area as described in Board Rule §523.102 (CPE Purpose and Definitions) and Board Rule §523.130 (Ethics Course Requirements).

I understand that the decision of the Board is final and should the exemption be denied, I will be required to accrue and report Continuing Professional Education according to Board Rule §523.113(1)(E) (Exemptions from CPE).

I certify that the information provided for the Affidavit for Exemption from Continuing Professional Education is true and correct to my knowledge.

Affiant’s Signature

Affiant’s Name (printed)
CONTINUING PROFESSIONAL EDUCATION EXEMPTION

Affidavit for Exemption F

My name is ____________________________________________, I am of sound mind, capable of making this affidavit, and personally acquainted with the facts stated herein.

I hold Texas State Board of Public Accountancy certificate number ______________ which was issued on __________________________, which certifies me as a certified public accountant in the State of Texas.

Pursuant to Board Rule §523.113(1)(F) (Exemptions from CPE), I have extenuating circumstances that prevent compliance and as such, I believe that I am eligible to be exempted by the Board from the continuing professional education requirements of the Board. I am attaching a disclosure of all pertinent information to this affidavit.

The reason I am requesting an exemption is: ______________________________________

_________________________________________________________________________

_________________________________________________________________________

I recognize that should I receive the exemption, but subsequently change my status, I must accrue the minimum number of required credits of continuing professional education for the period of my exempt status. The CPE credits shall be accrued from the technical area as described in The CPE credits shall be accrued from the technical area as described in Board Rule §523.102 (CPE Purpose and Definitions) and Board Rule §523.130 (Ethics Course Requirements).

I understand that the decision of the Board is final and should the exemption be denied, I will be required to accrue and report Continuing Professional Education according to Board Rule §523.113(1)(F) (Exemptions from CPE).

I certify that the information provided for the Affidavit for Exemption from Continuing Professional Education is true and correct to my knowledge.

_________________________________________________________________________

Affiant’s Signature

_________________________________________________________________________

Affiant’s Name (printed)