SBA_2023 Lic Renewal Rev. 10/22

STATE OF CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION

Board of Accountancy 450 Columbus Blvd, Ste. 801 Hartford, CT 06103

Email: dcp.licenseCPA@ct.gov Web site: www.ct.gov/dcp



For Official Use Only								

Web site. www.et.gov/ dep									
An applicant may request a wai request by checking off the appr						r your waiver			
☐ medical reason ☐ online payment issues ☐ no computer/no access ☐ website error/login error									
unable to navig	gate online 🔲 of	ther rea	son(s):						
2024 Connecticut CPA License Renewal Form									
This renewal is for an individual C address above <u>no later than Dece</u>									
Check <u>only</u> (\checkmark) one:									
I choose to renew my CPA L check or money order in the ar					of this renew	al and return with a			
I choose <u>NOT</u> to renew my Capply for the Registration, pl \$40.00 made payable to "Trea Certified Public Accountant and	lease return this pasurer, State of Co	page of nnecticu	the renewal (2nd page no	<u>t</u> required) with	a check or r	noney order for			
I choose <u>NOT</u> to renew my CPA title during the inactivation you must complete the reinstate application for instructions.	on of my Connecti ement application	cut CPA	A license. Should you wish	to reinstate your	CPA License	, after a lapsed year(s)			
Section I: Renewal Applicant									
First Name		Mida	le Name	Last Name					
Business Name (If using busine	ss address please	state b	usiness name)						
Street Address			City	State		Zip Code			
Telephone Number	Email Address	Email Address (mandatory for all applic			ts) Date of Birth				
Social Security Number*	CT CPA Certificate Number			CT CPA License Number					
The Federal Privacy Act of 1974 requires the Section II: Other State Lic				s required pursuant to	CGS17b-137a.	_			
1. List all jurisdictions where		-		abbreviations or	nly):				
2. Have you ever been convident	cted of a crime w	hich co	nstitutes a felony? \square Ye	es No If Yes	, attach a sta	tement of explanation			
Section III: Attestation									
I,(Printed Name of Renea	val Applicant)		declare under ¡	penalty of perjur	y, under the	e laws of the State of			
Connecticut that all statements knowledge that all statements a question may be grounds for d	made in this appl	lication	are subject to investigation						
Signature of Renewal Applicant					 Date				

Section IV: Out of state acknowledgement of filed continuing professional education

Connecticut CPA License holders whose principal place of business is outside of this state and holds an active license in another jurisdiction may show compliance by signing below that he or she has completed the continuing professional education requirements in their principal place of business during his or her last renewal.											
Icertify I have complied with my CPE requirements under my active CPA License in said, Print name of CPA											
jurisdiction under License No Signature Date other state's no.											
If you report CPEs in another jurisdiction, you will be responsible for maintaining your CPE documentation in the event you are selected for audit.											
Section VI: In state requirements of continuing professional education											
Connecticut CPA License holders, unless specifically exempted, are required to report to the Board by December 31, 2023, their compliance of gathered continuing professional education (CPE) for the fiscal year 7/1/2022 through 06/30/2023* a minimum of 40 hours of CPE each year in order to maintain an active license into the next calendar year. (*Note: Current extension of CPE's were due by 7/31/2023).											
Check off exemption re	Check off exemption reason below:										
If you are specifically exempt from reporting CPE – check the appropriate box:											
☐ I am exempt from the 2023 CPE requirement because my CT CPA License was issued between 7/1/2022 through 12/31/2023.											
☐ I am exempt from the 2023 CPE requirement because my CT CPA License was reinstated between 1/1/2023 through 12/31/2023.											
☐ The State Board of Accountancy has issued me an exemption for this CPE cycle, and I have attached supporting documentation.											
Enter courses using this reporting sheet. Make as many copies of this page as necessary and indicate the number of pages being provided below. Incomplete pages or information or totals will be returned. Last Date of completed Ethic (mm/dd/yy)											
ProgramSponsor	Program Location	Program Title or Description	Date(s) Attended entire date required (mm/dd/yy)	Program Type * (see codes below)	CE Hours						
*Please use the following codes to complete the Program Type Column: I = Instructor at a CE course or program (maximum of 20 CE hrs. per year) P = Participant or attendee at a CE course, seminar or program S = Self Study Course (unlimited) A = Author credit is being claimed (maximum of 10 CE hrs. per year) E = Ethics course credit being claimed (4 hours every three years)											
This office is not respo you the licensed CPA	nsible for keeping a are responsible for k	or reported CPEs for your reco and providing copies of your re seeping and maintaining your re se event you are selected for aud	ported CPEs, reported	Page	of						