



HONG KONG INSTITUTION OF CERTIFIED AUDITORS

The Secretary of HKICA

Room 108, 1/F Sun Ling Plaza, 30 On Kui Street, Fanling, New Territories

Tel: 2789 2389, Email: hkica.hkica@gmail.com Website: <http://www.hkica.org>

APPLICATION FORM AS APPROVED TRAINING ORGANIZATION

Name of Applicant Organization: _____	
Contact Details for Correspondence with HKICA	
Name of nominated contact within the organization: _____	
Position of contact within the organization: _____	
Address: _____	
Postal Code: _____ Telephone: _____	
Fax: _____ Email: _____	
Contact Details to be uploaded to the HKICA's website as list of Approved Training Organizations for public access.	
Address: _____	
Post Code: _____ Telephone: _____ Fax: _____	
Email: _____ WebPage: _____	
Has your organization had an application rejected or certification refused, withdrawn or suspended by another Training Certification Association? No <input type="checkbox"/> Yes <input type="checkbox"/> Give details: _____	
Any certification or approval from another Training Certification Association? No <input type="checkbox"/> Yes <input type="checkbox"/>	
Name of Training Certification Association, if yes: _____	
First certification/approval date: _____	
No. of training establishment(s) applied for approval: _____	
Fee enclosed (amount) (Schedule of fees is detailed in HKICA05''): _____	
Payment method: Cheque <input type="checkbox"/> No.: _____ On-line Credit card <input type="checkbox"/>	
Authorised Signatory (if different from contact):	
Name: _____ Position within the organization: _____	
Signature: _____ Date: _____	



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FOR SECRETARIAT USE ONLY:				
PREMISES AND FACILITIES REQUIREMENTS				
Insurance and safety	Document review <input type="checkbox"/>	On-site <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Classroom facilities	Document review <input type="checkbox"/>	On-site <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
QUALITY REQUIREMENTS				
Control of documents	Document review <input type="checkbox"/>	On-site <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
System of examination	Document review <input type="checkbox"/>	On-site <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
RECOMMENDATION				
Overall comments: _____ _____				
Training organization is recommended to be approved			Yes <input type="checkbox"/>	No <input type="checkbox"/>
No. of training establishments recommended for approval: _____				
Training establishments not recommended: _____				
Team Leader:	Signature :			
Other team member:	Signature :			

主辦機構

Organised by



Hong Kong Institution of Certified Auditors

香港专业审核师学会

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「中小企业发展支援基金」拨款支助

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工业贸易署

Trade and Industry Department