



ACCA CBE APPLICATION FORM

A. PERSONAL DETAILS

| First Name: |
|---------------------------|
| Surname: |
| Date of birth: |
| ACCA Registration number: |
| Gender: |
| Postal address: |
| Phone number: |
| E-mail address: |

B. SUBJECT SELECTION

| SUBJECT NAME | FEES (GBP) | Please tick against the appropriate subject | Date booked (please write your preferred date of exam) |
|--------------------------------------|---------------|--|--|
| F1-Accountant in Business | 100 | | |
| F2-Management Accounting | 100 | | |
| F3-Financial Accounting- Please note | 120 | | |
| that F3 replaces F3(UK) and F3(INT) | | | |
| FA1-Recording Financial Transaction | 100 | | |
| MA1-Management Information | 100 | | |
| FA2-Maintaining Financial Records | 100 | | |
| MA2-Managing Cost and Finance | 100 | | |
| FAB-Accountant in Business | 100 | | |
| FFA-Financial Accounting | 100 | | |
| FMA – Management Accounting | 100 | | |
| F4- Corporate and Business Law | 120 | | |

Candidates **MUST** ensure that the entry details are accurate.

I confirm that the information provided is the truth and is accurate to the best of my knowledge and belief.

Data Protection

The British Council will only use the information that you are providing to confirm or communicate changes relating to this application. By signing below you agree that we may do this.

Candidate Signature:

Date:

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