

1. Candidate Registration No (CRN): _____ (leave empty if you do not have CRN)

2. Candidate Name: _____

3. Exemption(s):

I wish to apply for exemption for the following:

Paper	Tick here	State specific grounds in support of your application for exemption and attach all relevant documents as proof
Certificate of Proficiency in Shari'ah Standards (CPSS)	<input type="checkbox"/>	
Certificate of Proficiency in Audit, Assurance, Governance and Ethics (CPAAGE)	<input type="checkbox"/>	

4. Please tick to confirm you have enclosed the following documents where applicable:

- ☐ True, certified, and attested copies of academic degrees and professional qualifications
- ☐ Candidate Registration No. if exemption is sought based on AAOIFI Fellowship

5. I hereby certify that to the best of my knowledge all the information I have provided on this form and all supporting documents are true and correct and I agree to abide by the CSAA Exemption Scheme, and all rules related thereto.

SIGNATURE: _____

DATE: _____