



## CIPA MODULE(S) EXAM REGISTRATION FORM

## **EXAM(S) REGISTRATION FORM**

CANDIDATE REGISTRATION NUMBER (CRN)		
		(leave empty if you don't have it)
YOUR NAME		
I hereby register myself for the following CIPA Mod	ule(s) exam(s):	
CIPA Module(s) Selection	Exam Date	Exam Location (centre)
Financial Accounting and Reporting (FAR)	02 December 2024	
Auditing, Assurance, and Ethics (AAE)	03 December 2024	
Business and Regulatory Environment (BRE)	03 December 2024	
Shari'ah Standards and Shari'ah Governance (SS&SG)	04 December 2024	
<ul> <li>Registration and postponement deadline for the above-mentioned exam sessions is 02 November 2024</li> <li>You may register for more than one module exam by tick-marking the "Selection" box</li> <li>AAOIFI reserves the right to cancel and/or change the exam date with notification to the Candidate of the same</li> <li>The exam center and timing shall be communicated to the Candidate in due time</li> <li>I understand that I have one exam sitting available per module. Failure to pass the exam at first attempt for the given module would necessitate a payment of USD 200 per exam sitting as Exam Resit Fees. I also understand that failure to sit for the registered Exam would result in a forfeiture of the available exam sitting and that a new Exam registration, along with payment of Exam Resit Fees, shall be required. I also understand that I need to contact AAOIFI and confirm of the availability of an Exam Centre in my city.</li> </ul>		
CANDIDATE SIGNATURE:	DA1	re: