Illinois Board of Examiners 1120 East Diehl Road, Suite 107 Naperville, IL 60563

PHONE: (815) 753-8900 FAX: (815) 753-8953 E-MAIL: help@ilboe.org

The Pre-Evaluation is NOT a REQUIRED part of the evaluation process. It is intended as an advisory tool, so you will receive a report of your currently accumulated earned hours. To receive credit for courses in progress and approval to sit for the CPA exam, please submit a Domestic Evaluation application and the \$200 fee.

We do not have an electronic version of this application.

CHECK ONE BOX BELOV	V ONLY IF EITHER APPLIES TO Y	OUR SITUATION:	
[] I have taken one, two or the	nree sections of the CPA examination in	another jurisdiction.	
[] I have taken all four section	ons of the CPA Examination in another j	urisdiction.	
NAME: we highly recommen	nd you write your name as it appears o	on your primary id.	
Last	First	Middle	
MAILING ADDRESS:			
Street Number and Name		Apt. #	
City	State/Province/Country	Zip/Postal Code	
EMAIL:	PHONE NUMBER:		
	SSN without the consent of the individual to anyone outside ASBA's background check fee associated with processing early and the consent of the individual to anyone outside ASBA's background check fee associated with processing early and the consent of the individual to anyone outside ASBA's background check fee associated with processing early and the consent of the individual to anyone outside ASBA's background check fee associated with processing early and the consent of the individual to anyone outside ASBA's background check fee associated with processing early and the consent of the individual to anyone outside ASBA's background check fee associated with processing early and the consent of the individual to anyone outside ASBA's background check fee associated with processing early and the consent of the consent o		
DATE OF BIRTH:			
SEX: [] Male [] Female	TITLE: [] Mr. [] Mrs. []]	Ms. [] Miss	

List ALL universities/colleges you have attended. For each institution attended, you must submit a transcript. Unofficial transcripts are accepted. Official transcripts will be used for the Credentials Evaluation applications found online.

Institution	City, State or Country	Entrance MM/YYYY	Exit MM/YYYY	Hours Earned or Degree/Diploma and date earned

Enclose a check or money order for \$50 in U.S. funds drawn on a U.S. Bank payable to Illinois Board of Examiners. We do not accept cash.

Under penalty of perjury, I certify to the truth and accuracy of all statements, answers representations made in the foregoing and in all supplementary statements and applic materials.		
Signature	Date	