



South Carolina Board of Accountancy

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llr.sc.gov/acct

CPA 'RETIRED' APPLICATION

A licensee who meets the requirements of 40-2-275(A) may apply to the board for permission to place the word 'Retired' adjacent to their 'Certified Public Accountant' title on any document or device on which the 'Certified Public Accountant' title.

A licensee with 'Retired' status pursuant to subsection 40-2-275(A) may meet the continuing professional education requirement for renewal in Section 40-2-250(C) by documenting the completion of one-half the required hours during the immediately preceding calendar year, provided that he includes no more than one-half of the required hours with the carryover of excess hours provided through board regulation.

All other requirements for the renewal of a license with 'Retired' status remain the same as in Section 40-2-250.

License No.: _____

APPLICANT INFORMATION

Last Name: _____ First: _____ Middle: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

(If different than above)

Daytime Phone No.: _____ Email: _____

Current Occupation: _____

Current Employer: _____

Employer Address: _____ City: _____ State: _____ Zip: _____

To qualify for 'Retired' status, you must be able to answer yes to all of the following questions:

- 1. Have you attained at least thirty years of combined experience as a licensee in this state or in a substantially equivalent state? [] Yes [] No

List qualifying licensure below:

Table with 4 columns: State, Dates Licensed (MM/YY to MM/YY), License No., Status (Active, lapsed, etc.)

- 2. Have you reached at least fifty-five years of age during a prior license year? [] Yes [] No

Date of Birth (May require proof of age): _____

- 3. Do you work an average of 20 hours per week or less? [] Yes [] No

- 4. Do you affirm that you do not offer attest services pursuant to Section 40-2-20(2) or compilation services pursuant to Section 40-2-20(6)? [] Yes [] No

ATTESTATION

I certify under penalty of perjury to the truth and accuracy of all statements, answers and representations contained herein. I further certify that I have read the information on this application and understand fully the actions of requesting CPA Retired Status.

Signature of Applicant

Date

PRIVACY DISCLOSURE

South Carolina Law requires that every individual who applies for an occupational or professional license provide a social security number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databanks established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.

Other personal information collected by the Department for the licensing boards it administers is limited to such personal information as is necessary to fulfill a legitimate public purpose. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on the application may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act, and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical services.