



State of Tennessee
 Department of Commerce & Insurance
 Tennessee State Board of Accountancy
 500 James Robertson Parkway
 Nashville TN 37243
 615-741-2550 or 888-453-6150

AUTHORIZATION FOR TRANSFER OF EXAMINATION INFORMATION

Tennessee licensure candidates who successfully completed the Uniform CPA Examination in a state other than Tennessee and were never licensed in that state may have those scores transferred to Tennessee by completing the top portion of this form and sending it to the state of examination. The state of examination may charge to complete the form so you will want to check with them before mailing them the form.

Applicant Information:

 Last Name First Name Middle Name Maiden Name

 Mailing Address City State Zip

(_____) _____
 Phone Contact Date of Birth Social Security Number

I hereby request and authorize the _____ Board of Accountancy to provide any and all pertinent information requested in this form to the Tennessee State Board of Accountancy.

 Signature Date

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Verification of CPA Examination Passing Dates:

State Completing This Section: Please return form to the Tennessee State Board of Accountancy via mail or email to Accountancy.Board@tn.gov.

Part Passed	Date of Examination	Grade	AICPA I.D. No.
AUD			
BEC			
FAR			
REG			

Applicant has passed the AICPA or Your State Board's ethics examination with the following Score:
 Date _____ AICPA _____ State Board _____ No Ethics Exam _____

The information provided above is correct to the best of my knowledge:

Board/Agency _____

Signature _____

SEAL

Title _____ Date _____