

City **Manama**

REGISTRATION FORM

	Term:		
Total BHD		Total \$	
Part I: The Internal Audit Activity's Role in Governance, Risk and Control			
Part II: Conducting the Internal Audit Engagement			
Part III: Business Analysis and Information Technology			
Part IV: Business Management Skills			
Less Discount (specify Discount Code): _____			
Add: Enrollment fee			
TOTAL			

Personal Information

First Name _____ Middle Name _____ Last Name _____
Name as shown in your passport

Address _____

City _____ Country _____ P. O. Box _____

Mobile # _____ Home Tel. # _____ Work Tel. # _____

Company _____ Position _____ Work Fax # _____

University _____ Univ. Degree _____ E-mail _____

Nationality _____ CPR Number _____

CIA

Part I: The Internal Audit Activity's Role in Governance, Risk and Control

Part II: Conducting the Internal Audit Engagement

Part III: Business Analysis and Information Technology

Part IV: Business Management Skills

Less Discount (specify Discount Code): _____

Add: Enrollment fee

Other Information

Took any Professional Review Courses ? PRC Other None

Date _____ Course's name _____

Registering for: **CIA** (I II III IV)

Have you sat previously for the CIA Exam? ____ How many times? ____

Parts passed (CIA)? I ____ II ____ III ____ IV ____

Do you hold any Professional Designations (CMA, ACCA, CFA, CPA, ____)

Referred by

Email Ad Ex-Student Instructor Newspaper Amideast

Direct Mail Friend Magazine Seminar Chapter

University Work Staff U.S Embassy Other

- I UNDERSTAND that, in case I failed the exam, I am eligible for the tuition fee refund (excluding Registration and Finance fees as well as Material and Sponsorship fees when Applicable) ONLY if I have met the following requirements: registered for the four parts of CIA Powers Professional Review, attended 90% of the classes, submitted 100% of homeworks, achieved 85% and above on all class Mock Exams, and sat and failed the respective exam following the course.
- I UNDERSTAND that I may cancel this enrollment and receive a refund (excluding Registration fee, as well as Sponsorship fee when applicable and finance fees) by providing a written notice addressed to the City Manager/Coordinator in my local area by the scheduled date of the second lecture of each part of the course
- I AGREE that any and all notes, CDs, floppy disks, and textbooks given to me, and notes taken by me in THE POWERS CIA REVIEW course will be used by me and no one else.
- I UNDERSTAND that the live course schedule is subject to change without prior notice. PRC reserves the right to discontinue one part or the full course if deemed necessary.
- After I pass the last part of the Exam, I agree to have my name included on a listing of "Successful Former Students" which is mailed along with announcements of the course to prospective students. I give the authority to PRC to use my Resume for job Referral.
- I have received, read, understood and agreed to all the conditions set forth in this registration form and its addendum, the course catalog and the Enrollment Agreement. This contract is legally binding instrument when signed by the candidate and accepted by the institution.

I will be attending most of the classes in : _____ Candidate's Signature _____ Date _____