



North Carolina State Board of Certified Public Accountant Examiners

Checklist: Re-Exam Application for the Uniform CPA Examination

Before proceeding to the re-Exam application, please make sure you have the following items available:

- Full legal name. If your name has changed since you last applied for the Exam, please complete the name change application through the portal. This is a separate process from the re-Exam application.
- Current contact information (mailing address, email address, and phone number)
- Copies of all records related to any charge, arrest, conviction, finding of guilt, prayer for judgment continued, or nolo contendere plea to any offense, including traffic violations that occurred since you last applied for the Exam, along with a personal statement explaining each matter. You are not required to disclose any arrest, charge, or conviction that the court has expunged.
- A detailed explanation and all relevant documents regarding any license denial or any license discipline, suspension, or revocation by any state or federal agency since you last applied for the Exam.
- MasterCard, VISA, or American Express to pay the administrative and section fees.

You are not required to apply for more than one Exam section on your application. The Board recommends that you apply only for the section or sections you are prepared to study and take within six months of your application's approval. If you choose to apply for multiple sections on this application, you may select up to three Core sections and one Discipline section.

Americans with Disabilities Act (ADA)

If you require an ADA accommodation, please answer “yes” to the ADA question in the application. You will be prompted to answer questions about your eligibility and accommodation history, and to upload the following forms.

- [Americans with Disabilities Act \(ADA\) Documentation of Candidate's ADA Accommodation History](#) (completed by University Disability Services)
- [Americans with Disabilities Act \(ADA\) Professional Evaluation and Documentation of ADA Disability](#) (completed by licensed or certified professional)
- [Americans with Disabilities Act \(ADA\) Physician's Verification of Disability and Need for ADA Accommodation](#) (completed by physician)

If you have questions about completing the re-Exam application, please contact the [Examinations staff](#).