

Application for Reinstatement of Revoked Certificate

Name	Certificate number
------	--------------------

Home address

City, state, zip

Please provide the employment histories for the period of time since revocation, listing the most recent employer first. Provide a brief description of the type of services you perform.

Current Employer
Address
City, state, zip

Previous Employer
Address
City, state, zip

Previous Employer
Address
City, state, zip

- Have you ever been suspended or expelled from any organization related to the practice of public accounting? Yes No
- Have you ever been convicted by any court or other body of any felony, misdemeanor, or any other discreditable act (not including traffic violations)? Yes No
- Have you ever been discharged or resigned under charges? Yes No

I acknowledge that since date of revocation, no certificate has been applied for or issued by the Board. Further, I acknowledge that since revocation of my certificate I have not engaged in activities requiring an active certificate. I request reinstatement of my certificate. I certify that the information above is accurate and that any misrepresentation may be cause for disciplinary action.

In accordance with Minn. Stat. § 326A.09 (2010), the undersigned requests reinstatement of the revoked certificate.

Printed name		Signature	
Certificate number	Date	Daytime phone number	

Minnesota State Board of Accountancy
TENNESSEN WARNING
for
SUBJECT OF AN INVESTIGATION

The Minnesota Board of Accountancy (the "Board") is seeking information from you that may be considered private or confidential under the Minnesota Government Data Practices Act. Minn. Stat. § 13.04(2) requires the Board to notify you of the following matters before you are asked to supply any private or confidential information about yourself.

1. This information is being collected as part of an investigation into your conduct, and the information you supply to the Board may be used to determine whether you have violated any statutes or rules enforced or administered by the Board.
2. You are not required to voluntarily cooperate with the investigations of the Board. However, if you choose to not voluntarily cooperate the Board may subpoena you to obtain the information it is seeking. You are advised that you are not required to incriminate yourself in any possible criminal investigation and you may exercise constitutional right to refuse to supply any information on grounds that you might incriminate yourself.
3. If you supply the information requested and it shows a violation of any of the statutes or rules enforced by the Board, then you may be subject to legal action by the Board.
4. If you choose to not supply the Board with any requested information, whether or not that choice is based on your constitutional right to refuse to supply the Board with the requested information, then the Board has the right to base its decision whether to pursue action against you based on the other information which is available to the Board.
5. You are advised that the information that you supply will be accessible to staff of the Board and the Office of the Attorney General. It may be released to other persons and/or governmental entities that have statutory authority to review the information, investigate specific conduct and/or take appropriate legal action, including but not limited to law enforcement agencies, courts and other regulatory agencies. If the Board institutes a formal disciplinary action against you, then your name and information you supply could become public.