Audit Practice Manual Application Workshop

The Institute's revised Audit Practice Manual ("APM"), which was issued in November 2010, has been updated to address the requirements of Clarified Hong Kong Standards on Auditing.

- Sessions will be held to introduce the revised APM and the requirements under the Clarified Hong Kong Standards on Auditing and how they affect audit engagements of non-listed entities.
- The learning workshops are planned to refresh audit skills in risk assessment and risk response. Sessions on how to navigate the excel based audit programmes contained in the revised APM will also be included.

Participants are required to bring along their revised APM (either hardcopy or softcopy) for case illustrations.

Language

Cantonese

Competency

Auditing and assurance

Rating

Intermediate Level*

CPD Credit Hour

7 hours

\$ 420 (members) \$680 (Non-members)

HKICPA Training Centre 27/F, Wu Chung House, Wanchai

Programme schedule

Download Application Form

Apply on-line

Date	Topic	Time	Deadline for Applications
15 October 2014 (Wednesday)	Audit Practice Manual Application Workshop	9:00 am – 5:00 pm	8 October 2014

^{*} Please refer here for descriptions of other competencies and ratings.

Audit Practice Manual Application Workshop

October 2014

Please click here for online enrolment (for HKICPA members only)



Finance & Operations Department, Hong Kong Institute of CPAs 37th Floor, Wu Chung House, 213 Queen's Road East, Hong Kong Fax no: 2893-9853

Name: (*Mr. / Mrs. / Ms.)		HKICPA Membership No.:						
						(if applicable)		
Position held:			(for enrolment confirmation purpose) Fax No.:					
(Tick as appropriate)	Event Code	Audit Practice	Manual Application Works	shop	Enrolment deadline			
	APM141015	15 October 2014 (Wednesday)			8 October 2014			
☐ Cheque (no	☐ HK\$ 680 per p	person (HKICPA members) person (Non-HKICPA memb payable to "Hong Kong Ins	bers)	Accountants" or "HKI	CPA"			
□ VISA / MasterCard	□ BOC F	HKICPA UnionPay card				$\overline{}$		
Card Number:			Ca	ard Expiry Date (MM/	YY):			
Cardholder's Name (block letters): Cardholder's S			Signature:	Date:				
☐ I would like to have	an official receipt.	(Remarks: Official receipt will	be sent to your email addre	ss provided above.)				
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Payment & Enrolment Status Enquiry: 2287-7381			Event Information Enquiry: 2287-7057					
e-mail: finance@hkicpa.org.hk			e-mail: tls@hkic	e-mail: tls@hkicpa.org.hk				
For payment by cheque	, please fill-in your	postal address for refund i	n case the event is full or	r cancelled.				
Name :			Name :					
Address:			Address :					
								