

# External student

## Certificate of Eligibility

Student name: \_\_\_\_\_

Chartered Accountants Ireland student no: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile no: \_\_\_\_\_

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I \_\_\_\_\_ (print name) tutor/lecturer/professor

at \_\_\_\_\_ (indicate name of college) confirm that the  
abovementioned candidate is an undergraduate/postgraduate student at this college and is currently  
studying for the following degree/diploma:

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Title of signatory: \_\_\_\_\_

Return to:

Email: [cap1exam@charteredaccounts.ie](mailto:cap1exam@charteredaccounts.ie)

or

Post: CAP1 Executive, Exam Dept, Chartered Accountants Ireland, 47 -49 Pearse Street, Dublin 2