

CFE EXAM APPLICATION

Submit your complete Application to:

ACFE.com/MyExam or Exam@ACFE.com
Global Headquarters | The Gregor Building
716 West Avenue | Austin, TX 78701-2727 | USA

Questions?

T: (800) 245-3321 | +1 (512) 478-9000
F: +1 (512) 478-9297
ACFE.com/Contact M–F, 7:30–6:00 CT



APPLICATION INSTRUCTIONS

Please read all instructions carefully before submitting your application.

ACFE Member #

1.

You must be an Associate member to take the CFE Exam and earn the CFE credential. Join online at [ACFE.com/Join](#) before submitting your CFE Exam Application.
2.

Applications and supporting documents submitted online are generally processed within 3–5 business days. Applications submitted via mail, email or fax require an additional 7–10 business days for processing. Incomplete applications will not be processed.
3.

Submit a completed application and attach the following supporting documents (for faster processing, submit your supporting documents to [ACFE.com/MyExam](#)).

☐

Experience addendum describing details of your fraud-related job duties and percentage of time spent in the fraud-related categories.

☐

Three professional recommendation forms completed by individuals who have worked with you professionally and can comment on your character, integrity and professional skills. Recommendations will remain valid for three years or until a candidate's CFE Exam Application expires.

☐

Documentation of education including official transcripts, photocopies of degree certificates or diplomas (must be translated to English). Advisory transcripts or schedules are not accepted.

APPLICANT PERSONAL INFORMATION

Applicant First/Given Name	<input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Applicant Last Name/Surname
Mailing Address	Mailing City	Mailing State/Province
Mailing Zip/Postal/Routing Code	Mailing Country	
Primary Phone	Email Address	
Employer	Official Job Title	
Billing Address	Billing City	Billing State/Province
Billing Zip/Postal/Routing Code	Billing Country	
Alternate Phone	Birthdate (MM/DD/YYYY)	

COMMUNICATION PREFERENCES

- ☐

Send me information on ACFE educational offerings, including CPE, events, training and products.
- ☐

Subscribe me to *The Fraud Examiner* e-newsletter for fraud news, resources, training and more.
- You can withdraw permission at any time on your Communications Preference page at [ACFE.com](#).

APPLICATION FEE

CFE Exam Application Fee (the CFE Exam Application fee is non-refundable)	Price
Payment of the CFE Exam Application Fee is required before you submit your application and supporting documentation. If paying via credit card, please contact Member Services at (800) 245-3321 or use the secure live chat for processing.	\$475

☐ Check or Money order enclosed. Make checks payable to: **Association of Certified Fraud Examiners**. Check/Money Order #: _____

APPLICATION QUALIFICATIONS

Eligibility: Your eligibility to be certified is based upon a point system, which awards points for education, professional certifications and fraud-related work experience.

- All applicants certified by exam must have a minimum of 50 qualifying points and two full years of professional experience that is either directly or indirectly related to the detection or deterrence of fraud. The ACFE's Board of Regents has established the following categories as acceptable fraud-related experience: Accounting, Auditing, Criminology, Investigation, Loss Prevention, Law Enforcement or Legal experience as it relates to fraud. Visit [ACFE.com/CFEQualifications](https://www.acfe.com/CFEQualifications) to learn more about the fraud-related experience requirements.
- Applicants may take the CFE Exam with a total of 40 qualifying points; however, all applicants must have 50 or more points and two years of fraud-related experience to become certified.
- All points claimed below must be substantiated by submitting supporting documents (e.g., details of fraud-related work experience, documentation of education and/or professional certifications) to [ACFE.com/MyExam](https://www.acfe.com/MyExam).

Qualifications	Points Multiplier	Points
Add 5 points for each full year of professional fraud-related experience. (Concurrent experience in more than one area cannot be claimed.)	Number of years: _____ x 5 points =	
If less than two years' experience, indicate approximate date on which your professional experience will equal two years.	Date two years will be completed (mm/dd/yy): _____	
Add 40 points if you have completed a Bachelor's Degree.	Max of 40 points for a Bachelor's Degree	
If no degree, add 10 points for each full year of college (max of four years)	Years completed (max 40 points): _____ x 10 points	
Add 5 points for each Master's Degree earned.	Number obtained: _____ x 5 points =	
Add 10 points for each Ph.D., J.D. or equivalent degree earned.	Number obtained: _____ x 10 points =	
If you do not meet the minimum points requirements with education and/or experience above to take the exam, you may add 10 points for each ACFE approved Professional Certification (e.g., CPA, CIA, CMA, etc.) earned. For a list of certifications approved by ACFE, visit ACFE.com/CFECertifications . _____ Certification _____ Certification	Number obtained: _____ x 10 points =	
TOTAL POINTS		

- How many cases of suspected fraud have you investigated or uncovered (Approximate number required. Please include all cases resolved or not.):
- Have you ever written audit or security programs designed to detect or uncover fraud? ☐ Yes ☐ No
- Do you have experience in computer-related security? ☐ Yes ☐ No
- Have you ever conducted original research or written articles and/or books in a fraud-related field? ☐ Yes ☐ No
- Have you ever qualified as an expert witness in accounting or fraud matters by a judicial authority? ☐ Yes ☐ No
- Have you ever served on professional committees? ☐ Yes ☐ No
- Do you have any special qualifications in a fraud-related area? ☐ Yes ☐ No

CHARACTER

- Have you ever been convicted of any felony or a misdemeanor involving moral turpitude that you have not previously reported to the ACFE ("Moral turpitude" means an offense that calls into question the integrity or judgment of the offender, such as fraud, bribery, corruption, theft, embezzlement, solicitation, etc.)? ☐ Yes ☐ No If yes, please describe*:

- Have you ever been disciplined, sanctioned, reprimanded or subjected to any like action by a professional body of which you were or are a member? ☐ Yes ☐ No If yes, please describe*:

- Have you ever had a professional license or other authority to practice revoked or suspended? ☐ Yes ☐ No If yes, please describe*:

*Attach additional pages if necessary.

CONSENT TO EXAM PROCTORING

The CFE Exam is a proctored examination. To sit for the exam, you must consent/agree to the following:.

1. ACFE or its authorized proctor may access your webcam and computer screen during the exam.	<input type="checkbox"/> I agree
2. ACFE or its authorized proctor may record, store, review, and audit: images of your ID card and photograph; and video/audio recordings of you and your test space during the exam.	<input type="checkbox"/> I agree
3. ACFE or its authorized proctor may utilize biometric facial recognition software for identity verification purposes and to detect and prevent exam violations.	<input type="checkbox"/> I agree
4. If you take the exam on a workplace or public computer, you certify that the use of the CFE Exam proctoring software on the computer will not violate any user restrictions.	<input type="checkbox"/> I agree

APPLICANT SIGNATURE REQUIRED

I certify that the information submitted with this application is true and correct to the best of my knowledge. Falsification of any information on this application is grounds for denial or revocation of membership. I understand that any and all information provided in this application is subject to verification. If this application is accepted, I agree to abide by the Bylaws and Code of Professional Ethics of the Association of Certified Fraud Examiners. Membership is a privilege and not a right. Active membership is a requirement to take the CFE Exam and maintain the CFE credential. I understand my CFE Exam Application will expire two years after the initial application date. If after two years, I have not completed the CFE Program, my application will be canceled and a new application, fee and supporting documentation must be submitted to continue. Qualifications are established by the Board of Regents whose decisions are final. If your employer or a funding agency pays for your CFE Exam fee, the ACFE may, at the funding party's reasonable request, verify your CFE Exam pass/fail status. An electronically affixed signature on this form carries the same level of enforceability and validity as a handwritten signature.

SIGN HERE

Applicant Signature

Date (MM/DD/YYYY)

The ACFE collects and stores your personal data in the U.S. to provide member services and fulfill transactions requested by you. For a full explanation of your rights regarding how we store and use your data see: [ACFE.com/Privacy-Policy](https://www.acfe.com/Privacy-Policy).

PROFESSIONAL WORK EXPERIENCE ADDENDUM

APPLICATION INSTRUCTIONS

- 1. Complete this experience addendum for each organization where you have held a fraud-related position. Fraud-related experience means that you have worked full-time in a position that contributes to the prevention, detection or deterrence of fraud. To view the acceptable categories of fraud-related experience, visit [ACFE.com/CFEQualifications](#).
- 2. Your fraud-related experience will be reviewed and accepted based on the information provided. You will be notified by email if additional information or clarification is needed. Submit additional forms if necessary.

APPLICANT INFORMATION

Applicant First/Given Name ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms.

Applicant Last Name/Surname

ACFE Member #

EXPERIENCE

Employer

Official Job Title

Hire Date (MM/DD/YYYY)

End Date (MM/DD/YYYY)

Please describe the fraud-related responsibilities in this position (attach additional pages if necessary):

Please outline the specific percentage (%) of time spent in each of the following categories:					
Auditing:	%	Fraud-Related Controls:	%	Consulting on Fraud-Related Matters:	%
Forensic Accounting:	%	Loss Prevention:	%	Teaching or Research at a University on Fraud-Related Matters:	%
Fraud Investigation:	%	Computer Forensics:	%	Other (specify): _____	%

EXPERIENCE

Employer

Official Job Title

Hire Date (MM/DD/YYYY)

End Date (MM/DD/YYYY)

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Forensic Accounting:	%	Loss Prevention:	%	Teaching or Research at a University on Fraud-Related Matters:	%
Fraud Investigation:	%	Computer Forensics:	%	Other (specify): _____	%

PROFESSIONAL RECOMMENDATION FORM

FORM INSTRUCTIONS

- Applicant:**
 - ☐ Three completed forms required
 - ☐ Submit completed forms with CFE Exam Application
 - ☐ Forms expire three years after date written or when application expires
- Recommender:**
 - ☐ Must have worked with the applicant professionally
 - ☐ Must be written in English or translated to English
 - ☐ Complete and return form to CFE Exam applicant

INFORMATION ABOUT APPLICANT

Applicant First/Given Name <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Applicant Last Name/Surname	ACFE Member #
City	Country	
Employer	Official Job Title	

INFORMATION ABOUT RECOMMENDER

- How do you know the applicant?**
- ☐ I am the applicant's supervisor (past or current)
 - ☐ I am the applicant's co-worker (past or current)
 - ☐ I am the applicant's professor (past or current)
 - ☐ Other (please explain):

Where have you worked with the applicant?

Please briefly describe your professional working relationship with the applicant:

Are you a Certified Fraud Examiner? ☐ Yes ☐ No

Recommender First/Given Name:	Recommender Last Name/Surname:
Employer	Official Job Title
Business Address	
Phone	Email Address

ADDITIONAL COMMENTS

STATEMENT OF CHARACTER REFERENCE

In my opinion the applicant named on this form exhibits the character, integrity and professional skills necessary to hold the Certified Fraud Examiner (CFE) credential. I hereby recommend this applicant to be certified as a CFE. I certify that the information submitted with this recommendation form is true and correct to the best of my knowledge. Falsification of any information on this form is grounds for denial. An electronically affixed signature on this form carries the same level of enforceability and validity as a handwritten signature.

SIGN HERE

Recommender Signature

Date (MM/DD/YYYY)