



**Nebraska Board of Public Accountancy
PO Box 94725 Lincoln, NE 68509
(402) 471-3595**

**QUALITY ENHANCEMENT PROGRAM (QEP)
CRITERIA FOR VOLUNTEER REVIEWERS**

The Board's QEP program reviews practitioners' audits, reviews, and compilations for the purpose of education. Each practice unit must submit reports or request an exemption from filing reports every three years. The year 2009 process needs volunteer reviewers in the end of May and June. Tentative dates for reviews are as follows:

- May 28-29, 2009 – Review of Governmental Reports (need a minimum of seven people)
- June 1 – 5, 2009 – First Level Review of Reports
- June 8 – 12, 2009 – Second Level Review of Reports

By participating in the QEP Review Program, a practitioner can earn eight hours of Continuing Professional Education (CPE) per each day of review and his/her firm receives \$100 per day to help defray expenses. Volunteer reviewers must complete an application (on the back of this form) and be approved in advance by the Board.

Reviewers must meet the following criteria for First Level Review:

1. Must have five years of experience in audits, reviews, or compilations **or** five years of Academia.
2. Should participate in at least five financial statement engagements per year.
3. Must sign a confidentiality statement regarding the reports reviewed.

Reviewers must meet the following criteria for Second Level Review:

1. Must have a current Nebraska active permit to practice.
2. Must be competently experienced in audits, reviews, or compilations.
3. Should participate in at least five financial statement engagements per year.
4. Must sign a confidentiality statement regarding the reports reviewed.

If you are interested in participating in the QEP program as a volunteer reviewer, please indicate below which dates you would be able to review, complete the application on the reverse side of this page, and return this sheet to the Board of Public Accountancy at PO Box 94725 Lincoln, NE 68509 **by May 1, 2009**. You will be notified if you are selected to participate in the review process. **Thank you!**

I am interested in serving on the Board's QEP Committee. Please submit my name to the Board as a candidate for appointment to the QEP Committee. YES NO

Please indicate how many days you would be able to participate in the review process: _____

Please indicate on a scale from 1 to 5 (1 being the highest and 5 being the lowest) the days you would like to review.

___ May 28, 2009 ___ May 29, 2009 (Government reports only – 1st and 2nd level reviews)

First Level Reviews:

___ June 1, 2009 ___ June 2, 2009 ___ June 3, 2009 ___ June 4, 2009 ___ June 5, 2009

Second Level Reviews:

___ June 8, 2009 ___ June 9, 2009 ___ June 10, 2009 ___ June 11, 2009 ___ June 12, 2009

(Complete reviewer application on reverse side.)

QUALITY ENHANCEMENT PROGRAM (QEP)

VOLUNTEER REVIEWER APPLICATION

Practitioners wishing to be volunteer reviewers must complete this application and return it to the Board's office at PO Box 94725 Lincoln, NE 68509

Name _____ Certificate # (if applicable) _____

Organization _____ Fed. ID# _____

Address _____

City, State, ZIP _____

Phone _____

E-mail _____

1. Nebraska permit number (if applicable): _____

2. What position do you hold in your organization? _____

For how long? _____

3. How many years of experience do you have in performing the following reports?

Audits? _____ Reviews? _____ Compilations? _____

4. Do you have review responsibility in your firm? Yes _____ No _____ N/A _____

If yes, at what level? _____

5. How many financial statement engagements do you perform per year? _____

6. Check the areas of expertise you possess (check all that apply).

____ Insurance ____ Banking ____ Not for Profit ____ School ____ Government

____ Construction ____ Co-ops & Grain Elevators ____ Hospital ____ HUD

____ Other (specify): _____

7. Have you ever been a QEP reviewer? Yes _____ No _____

If yes, when? _____

8. Have you ever been a QEP Team Captain before? Yes _____ No _____

If yes, when? _____

I agree that, if asked to review reports in the QEP Program, I will treat the reports, recommendations, and findings as confidential information. I will review work products objectively, discreetly, and confidentially. I will not discuss reports reviewed, recommendations, and/or findings with anyone but Board members, Board personnel, or QEP Committee members.

Date

Signature