

Form <b>2587</b> (March 2017)	Department of the Treasury – Internal Revenue Service <b>Application for Special Enrollment Examination</b>			OMB Number 1545-0949
The data on this form may be completed and submitted online by going to <b>www.prometric.com/see</b>				
Last name		First name		Middle initial
Mailing address <i>(If you live outside the United States, do not abbreviate Country name. Include Province and Postal Code if applicable)</i>				
City	State	ZIP <i>(Postal)</i> code	Country	Province
Primary telephone number		Secondary telephone number		
Date of birth <i>(mm-dd-yyyy)</i>	Preparer Tax Identification Number <i>(PTIN)</i> . <i>(See PTIN instructions on the next page for more information.)</i>			