



THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA
(Set up by an Act of Parliament)

REGISTRATION FORM

**Certificate Course on Preparation of Appeals, Drafting of Deed & Documents
and Representation before Appellate Authorities and Statutory Bodies**

Committee for Capacity Building of Members in Practice (CCBMP), ICAI

Affix recent
self-attested
passport sized
photograph

1) Name in block letters(as per Institute's records):

First Name : _____

Middle Name : _____

Last Name : _____

Father's Name : _____

Gender : Male Female

Nationality : _____

2) Member Details:

a) Membership Number : _____

b) Membership Status : ACA FCA

c) Member Status : Active Removed

d) Any other Post CA : _____
Qualifications

3) Details of Practice:

a) Date of COP : _____

b) Name of Firm : _____

c) Associated as : _____

- Proprietor _____
- Partner _____
- Paid Assistant _____

4) Details of Employment:

a) Organization : _____ b) Designation : _____

c) Date of joining : _____

d) Address of Employer : _____

5) Address for Correspondence:

- a) House Number : _____
b) Street/Road : _____
c) Area : _____
d) City / Town : _____
e) PIN Code : _____
f) State : _____

6) Phone:

Phone No. with STD Code : _____ Mobile No : _____

7) Email Address:

Official : _____ Personal : _____

8) Centre for classroom sessions opted :Trichur

9) Details of the Course Fee:

a) Online Payment: Yes/No (If Yes, NEFT Reference No.)

b) Bank Draft/ Pay Order No : _____ Date : _____

Amount in Rs. : _____

Drawn on Bank : _____ Branch Name : _____

Date : _____

Place: _____

(Signature of the applicant)

Notes :

1. *Fees Structure:* Rs 14,160/- (Rs.12000/-+18% GST) for Members of ICAI for the complete course.
2. *Attendance to the course is compulsory.*
3. *Only eligible candidate with required number of attendance will be permitted for the examination.*
4. *In case the payment is through D.D/Pay Order, it should be drawn in the favour of "The Secretary, The Institute of Chartered Accountants of India", payable at New Delhi, indicating overleaf name of course and membership number.*
5. *Enclose self-attested One Passport Sized photograph.*
6. *Enclose self-attested photocopy of the Institute I-card or membership letter or Membership Certificate.*
7. *The applicant is required to submit invariably a hard copy of the Registration Form to "The Secretary, Committee for Capacity Building of Members in Practice" (CCBMP), The Institute of Chartered Accountants of India, ICAI Bhawan, Administrative Office Block, 1st Floor, A-29, Sector-62, Noida (U.P.) - 201309, India, Telephone Direct - +91 120 3045994*