

Mobile

THE INSTITUTE OF COST ACCOUNTANTS OF INDIA

CMA Bhawan, 12, SUDDER STREET, KOLKATA-700016

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Mode) FORM OF APPLICATION FOR REGISTRATION AS A STUDENT (As per Regulation 20 of ICMAI Regulations) То **REGISTRATION NUMBER** The Secretary to the Council of THE INSTITUTE OF COST ACCOUNTANTS OF INDIA 12, Sudder Street, Kolkata - 700016 CMA Support Centre / RC / Chapter Code Sir/Madam, (To be filled in by office only, as applicable) I wish to register as a student of the Institute of Cost Accountants of India. The required particulars are furnished below: 1. Name: (As per SSC/Class X Certificate) Select : Male : Female: First name Middle name Surname 2. Father's Name: Mother's Maiden Name: 4. Husband's Name: (a) Date of Birth: (Date/Month/Year) [e.g. dd/mm/yyyy]: (b) Nationality 6. Religion Caste (SC/ST/OBC/General) Physically Handicapped (Yes or No) If yes, Disability % Name of Government Hospital/Authority with date of Certificate Issue 7. Contact Details: e-mail id Telephone (STD Code and Number)

8. (a) Address:																											
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(b) State :	:		(c) City:									(d) Pin Code :														
9. W	/hether	qualifie	d ICMAI	Foundation/ICSI Foundation /CAT (Level I or II) ICMAI: Yes [No	[]	If yes	, pleas	se mentic	lowing	j:							
Name of the Examination				Institution								Foundation Identification No. Term and Year							nd Year	of pass	sing		Ro	Roll Number			
10. A	cademi	c Qualif	ication :																		·						
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12. M	ode of (Coachin	g Opted	: [Selec	t : Oral/	/Postal/e	e-learnin	g]																			
13.	(a) Pa	yment	Details :	Online /	Pay Fe	e Modu	le							(b) E	Bank Re	ference	: (to f	acilitate	refund o	f fees,	wherev	er applic	able)				
(i) Date of Payment												(i) Bank Account Number															
(ii) Name of the Bank											(ii) Name of Account Holder/(s)																
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I hereby declare that the particulars furnished above are true and correct and if at any time it is found that the said particulars are incorrect/false, I agree to my Registration being cancelled without any obligation on the part of the Institute to refund any fee paid by me to the Institute. I also hereby undertake that if enrolled for pursuing Intermediate course of the Institute, I shall be bound by the provision of the Cost and Works Accountants Act, 1959 CWA (Amendment) Act, 2006 and CWA (Amendment) Act, 2011 and the Regulations framed thereunder and any amendments that may be made from time to time.

Place: Date: Signature:

N. B.: Legal disputes, if any, arising in relation to Directorate of Studies, shall be settled within the jurisdiction of Hon'ble High Court, Kolkata.