

THE INSTITUTE OF COST ACCOUNTANTS OF INDIA FORM 1

FORM OF APPLICATION FOR REGISTRATION AS A STUDENT

(To Be Filled in by the candidate)

To

The Secretary to the Council of

THE INSTITUTE OF COST ACCOUNTANTS OF INDIA

12, Sudder Street, Kolkata - 700 016

(This application must be accompanied by the Identity card duly filled in by the applicant)

Sir,

I beg to apply for Re-Registration as a Student of this Institute of Cost Accountants of India. The required particulars are furnished below.

1. Name in full Mr. / Miss / Mrs.
(IN BLOCK LETTERS)

2. Name in short
(IN BLOCK LETTERS)

3. Address
(IN BLOCK LETTERS)

Pin Code State.....

4. Age and Date of Birth* 5. Occupation

6. Educational qualification ‡
University / Institution Year

7. Father's Name

** In case the applicant was previously admitted as a Registered Student of the Institute or of the dissolved company and if at any time such Registration was cancelled / discontinued or otherwise terminated :

(a) The date of previous Registration (b) The former Registration Number

(c) The reason for cancellation discontinuance, etc

I hereby declare that the particulars furnished above are true to the best of my knowledge and belief and should if at any time be proved that the said particulars were untrue 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 as a Registered Student of the Institute. I will be bound by the provision of the Cost and Works Accountants Act. 1959 and the Regulation framed thereunder or that may hereafter from time to time be made pursuant to the said Act.

I also send herewith a sum of Rs. 2000/- as student Registration fee.

Details of Payment :

Demand Draft No For Rs. Date

Drawn on / Bank Deposited Branch

Place

Yours faithfully

Date

(FOR INSTRUCTION PLEASE SEE OVERLEAF)

Signature

INSTRUCTION

†Documentary evidence for age and qualifications shall be in original of photostat/xerox copies thereof duly attested
 Registration Fees shall be paid through Demand Draft drawn on any scheduled Bank favouring "THE INSTITUTE
 OF COST ACCOUNTANTS OF INDIA" payable at Kolkata only.

The De-Novo application form is to be submitted to the Head Quarters only.

FOR OFFICE USE ONLY

Name

Registration No.

Date of Registration

Recd. fee Rs.

Receipt No.

Date

Inward No.

Demand Draft

For Rs. Date

Certificates

Qualifications	Exemption granted if any at the Intermediate Examination	Exemption granted if any at the Final Examination

Record of coaching completion

INTERMEDIATE			FINAL		
Stage	Date	Source	Stage	Date	Source
I			III		
II			IV		

Examination Results

INTERMEDIATE				FINAL			
Stage	Examination	Roll No.	Sig. with date	Stage	Examination	Roll No.	Sig. with date
I				III			
II				IV			

THE INSTITUTE OF COST
CMA BHAWAN, 12, SUDDER STREET,

ACCOUNTANTS OF INDIA
KOLKATA - 700 016

Name

.....

Address

.....

Pin Code :

Registration No. :

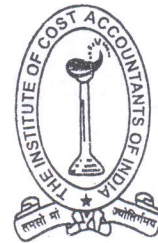
Signature
of Student :

STUDENT'S PHOTOGRAPH
SHOULD BE ATTESTED BY
ACMA or FCMA or ACA or
FCA or ACS or FCS or
ANY MEMBERS OF
PARLIAMENT/STATE
LEGISLATIVE ASSEMBLY
OR A GAZETTED OFFICER
OR A PRINCIPAL OF
A COLLEGE AND
PASTED IN THIS SPACE.

Signature & Seal of Issuing authority :

Student must carry this card at the Examination
Hall and produce on demand.

THE INSTITUTE OF COST
ACCOUNTANTS OF INDIA



IDENTITY CARD
