

Application No :



**KANNUR BRANCH OF SOUTHERN INDIA REGIONAL COUNCIL OF
THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA**
Brigade Centre, Fort Road, Kannur- 670 001, Ph. : 0497-2766555

APPLICATION FORM FOR ORIENTATION PROGRAMME FOR IPCC

1. Name in Full :
2. Sex :
3. Date of Birth :
4. Father's Name :
5. Address for Communication :

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PIN..... Ph :

E Mail id

6. Registration No IPCC :

(Please Enclose a copy of IPCC Registration letter)

7. Direct entry CPT Route

8. Blood Group :

9. Date of IPCC Exam the student is eligible to write : Year.....Nov/May

10. Details of course fee *(Draft or pay order should be made on " **KANNUR BRANCH OF SIRC OF ICAI** ", payable at Kannur)Rs.3000 /-*

Demand Draft/Pay Order No :

Dated :

Amount in words :

Drawn on Bank :

Branch :

I declare that the particulars given above are true and correct to the best of my knowledge and belief. I undertake to abide by all the rules and regulations of the Kannur branch of ICAI as may be in force from time to time during the period I am undergoing tuition. I understand that the fees once paid shall not be refunded.

Date :

Place :

Signature of Parent/Guardian

Signature of the Applicant

FOR OFFICE USE ONLY

Receipt No.

Date

Amount

Authorised Signature