

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

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

9. 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

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**FOR OFFICE USE ONLY**

Receipt No.

Date

Amount

Authorised Signature