| Registration Number: | |
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Space for Official Stamp

The Institute of Chartered Accountants of India APPLICATION FOR ENROLMENT FOR INTEGRATED PROFESSIONAL COMPETENCE COURSE (IPCC) /ACCOUNTING TECHNICIAN COURSE (ATC)

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| 1. Name in full (in C (First Name) | Capital Le | tters)(| As pe | er Inst | itute': | s Rec | ord/ | 10+2 | 2/Gra | duat | e Ce | rtific | ate) |) | | | | | | | | | | | | |
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| Maiden Name | ın case ot | marri | ea te | male s | stude | nt) | | | | | | | | | | | | | | | | | | | | |
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| 2. Gender Male |) Fe | male | C |) | | | l | | | | | | | | | | | | | | | | | | | |
| 3. Date of Birth | | _ | - | | _ | - | | | | | (dd | l/mi | m/y | /y) | | | | | | | | | | | | |
| 4(a) Mother's Nam | ne 🗌 | | | | | | | | | | | | | | | | | | | | | | | Τ | | |
| (b) Esther's No | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (b) Father's Nam5. Option for lev | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 6. Residential Ad | (with/ dress | with | _ | | | | of I | | | | | | | | | | | | _ | _ | ATO | C (<i>F</i> | AII I | Lev | els) | |
| oth Groups of IPCC | (with/ dress | with | _ | | | | | | | | | | | | | | | | _ | _ | ATO | C (<i>F</i> | AII I | Lev | els) | |
| oth Groups of IPCC 6. Residential Ad | (with/ dress | with | _ | | | | | | | | | | | | | | | | _ | _ | ATO | C (<i>F</i> | AII I | Lev | els) | |
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| oth Groups of IPCC 6. Residential Ad a) Permane | (with/viers) | ress | out | artic | les) | Bot | th G | irou | | | | | | | | | | les) | an | | | | | (Refer | r SI No | 8 of |
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| Email id | | | | | | | | | | | | | | | | | | | | | | |
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| Mobile No. | | | | | | | | | | | | | | | | | | | | | | |
| 7. Indic | ate op | otion | s for g | getti | ng st | udy | mat | ter | ial in | 'Hi | ndi' (| or 'E | Engli | ish' | (| C | Hir | ndi | | 0 | Eng | lish |
| 8(a) Nation India (In case of from approach) (b) Whether | an (foreign a ppriate a er Diffe | nation outho | rities for | ending the d | duration | n of t | the Cl | har O r | tered i | re o | untan | cy Co orn | ourse nity 1 | mus | t be en | close | ed) | perm | nit, as | Yes | e may | be No |
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| Examination | В | oard | / Auth | ority | y/Uni | ivers | ity | | , | /ear | | | Mark Obta | , | irade d | | Max | Mar | ks | | /aite | d/ |
| х | | | | | | | | | | | | [| A B | | / D grade) | | | | | 0 | Pass | sed |
| XII (compulsory qualification to register for IPCC) | | | | | | | | | | | |] [| A B | | D grade) | | | | | 0 | Pas | sed |
| Degree (Name) | | | | | | | | | | | | | Ι | | | | | | | 0 0 | Awa Pas | aited sed |
| Diploma (Name) | | | | | | | | | | | | | | | | | | | | 0 | Awa Pas | aited sed |
| (b) Parti | f joinin Date Culars th and | rega | _ arding | pas | _ | | | | Regis | tratio | on N o. | | | | | | | app | licat | ole (ye | ear, | |
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| 11.(a) I (name) | | |
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| hereby deposit towards Registration fee for Integrated F | Professional Competend | ce Course (IPCC) (choose one) |
| | (Without Articles) | (With Articles/ 1 yr. work experience) |
| Group I of IPCC | Rs.8,000/\$500 | _ |
| Group II of IPCC | Rs.5,000/\$300 | Rs 7,000/\$400 * |
| O ATC | _ | Rs 10,000/\$600 * |
| Both Groups of IPCC | Rs.9,000/\$550 | Rs 11,000/\$650 * |
| Group I of IPCC and ATC | Rs.9,000/\$550 | |
| Group II of IPCC and ATC | Rs.10,000/\$600 | Rs 12,000/\$700 * |
| Both Groups of IPCC and ATC | Rs.10,000/\$600 | Rs 12,000/\$700 * |
| (i) * Articled training starts only after passing Group I o | f IPCC.ATC student has to | undergo 1 year work experience. |
| (ii) Fees of Rs. 1,000/- meant for Student's Activities is to | be paid only once. | |
| (iii) Detailed chart of Fees is enclosed herewith. | | |
| (b) Rs. 400/- or US\$ 40 for the annual subscription | of Journal - The Charte | ered Accountant (optional) . |
| Details of Payment DD Date: DD DDD | No. | |
| Details of Payment if paid through online | | |
| Acknowledgement Number | Date: - | |
| O Amount in Rs. O Amount in \$ Amount: | | |
| Name of the Bank | | |
| | | mand Draft drawn in favour of |
| "The Secretary, The Institute of Chartered Accountants of Ind New Delhi in accordance with the address of the student. | ia" payable at Mumbai | / Chennai /Kolkata / Kanpur / |
| <u>Declaration</u> | | |
| I, undertake to abide by all the Rules of the Board of Studies, as may be | e in force from time to time | • |
| I hereby declare that the information furnished herein above is true to | the best of my knowledge. | |
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| Please affix | | |
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| Colour | 16411 | 22501 11 5 |
| | | (Within the frame only) |
| (For office use | e only) Signa | ature of the Applicant |
| Study sets issued/collected O Yes O No If Yes, In person from regional/branch office Offi | ce seal | |
| Date with office seal | | |
| | | |
| Applied in the Region O Western O Southern O Eastern | <u> </u> | thern |
| Signature of Dealing Assistant | Signature of Officer | |
| | In-Charge | |
| | | |
| ACKNOWLED | GEMENT | |
| Acknowledge with thanks receipt of Registration Form for IPCC/ ATC along | gwith Rs. O | r \$ by way of |
| Demand Draft No. dated | | |
| drawn on | | |
| from Mr/ Ms | | |
| as Registration Fee for IPCC/ ATC subject to realisation of the Demand Draf | t. | |
| | | Signature (Within the frame only) |

for The Institute of Chartered Accountants of India

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| Fee pavable | for Registration | of IPCC/ ATC |
|-------------|------------------|--------------|

| | 1 | 2 | 3 | 4 | 5 | 6 |
|--|-------------------------------------|---|-----------------|-------------------------------------|----------------------------------|---------------|
| | Both Groups IPCC (without articles) | Both Groups IPCC & ATC (without articles) | Group I of IPCC | Group II of IPCC (without articles) | Group II of IPCC (with articles) | ATC |
| Registration fees for ATC | - | Rs. 1,000/- | - | - | - | Rs. 4,000/-* |
| Registration fees for IPCC * | Rs. 5,000/-* | Rs. 5,000/-* | Rs. 4,000/-* | Rs. 4,000/-* | Rs. 4,000/-* | - |
| Registration Fee for Orientation Programme | Rs. 1,000/- | Rs. 1,000/- | Rs. 1,000/- | - | - | Rs. 1,000/- |
| Registration Fee for 100 hours ITT | Rs. 2,000/- | Rs. 2,000/- | Rs. 2,000/- | - | - | Rs. 2,000/- |
| Registration Fee for one year service experience | - | - | - | - | - | Rs. 2,000/- |
| Student's Activities Fee** | Rs. 1,000/-** | Rs. 1,000/-** | Rs. 1,000/-** | Rs. 1,000/-** | Rs. 1,000/-** | Rs. 1,000/-** |
| Student's Association Fee | - | - | - | - | Rs. 1,000/- | - |
| Registration fee as articled assistant | - | - | - | - | Rs. 1,000/- | - |
| TOTAL FEES in Rs. | Rs. 9,000/- | Rs. 10,000/- | Rs. 8,000/- | Rs. 5,000/- | Rs. 7,000/- | Rs. 10,000/- |
| TOTAL FEES in US \$ | \$ 550 | \$ 600 | \$ 500 | \$ 300 | \$ 400 | \$ 600 |

^{*} Registration Fee includes registration charges (Rs 1,000/- towards Board of Studies) and charges for providing Reading materials.



DOCUMENTS TO BE ATTACHED:

(i) Demand Draft/ Pay Order towards IPCC registration fee.

(ii) Attested copy of 12th pass or its equivalent Central Government recognized examination pass marks statement, duly attested by a Chartered Accountant/ Gazetted Officer/ Head of the Institution.

(iii) Attested copy of CPT pass marks statement, duly attested by a Chartered Accountant/ Gazetted Officer/ Head of the Institution (students are advised not to wait for CPT marks statement to be received from Examination division for registration to IPCC but proceed for IPCC registration with a copy of downloaded CPT marks statement. As soon as the Original CPT marks statement received an attested copy of the same to be submitted to the Regional Office without fail for procedural compliance).

| Gujarat, Maharashtra, Goa and the Union Territories of Daman & Diu and Dadra & Nagar Haveli | Western India Regional Council of The Institute of Chartered Accountants of India ICAI BHAWAN, 27 Cuffe Parade, Colaba, Mumbai – 400 005 Phone: 022-39893989,Fax: 022-39802953 E-mail: wro@icai.org |
|---|---|
| Andhra Pradesh, Kerala, Karnataka, Pondicherry, Tamil Nadu and the Union Territory of Lakshadweep | Southern India Regional Council of The Institute of Chartered Accountants of India ICAI BHAWAN, 122, M.G. Road, Post Box No. 3314 Nungambakkam, Chennai – 600 034 Phone: 044-39893989, Fax: 044-30210355 E-mail: sro@icai.org |
| Assam, Meghalaya, Nagaland, Orissa, West Bengal, Manipur, Tripura, Sikkim, Arunachal Pradesh, Mizoram and the Union Territory of Andaman-Nicobar | Eastern India Regional Council of The Institute of Chartered Accountants of India ICAI BHAWAN, 7, Anandilal Poddar Sarani, (Russell Street), Kolkata – 700 071 Phone: 033-39893989,Fax: 033-30211145 E-mail: ero@icai.org |
| Uttar Pradesh, Uttarakhand, Bihar, Madhya Pradesh, Rajasthan, Chhatisgarh and Jharkhand | Central India Regional Council of The Institute of Chartered Accountants of India ICAI BHAWAN, Post Box No. 314, 16/77B, Civil Lines Kanpur – 208 001 Phone: 0512-3989398, Fax: 0512-3011193 E-mail: cro@icai.org |
| Delhi, Haryana, Himachal Pradesh, Jammu & Kashmir, Punjab and the Union Territory of Chandigarh | Northern India Regional Council of The Institute of Chartered Accountants of India ICAI BHAWAN, 52-54, Vishwas Nagar, Shahdara, Near Karkardooma Courts, New Delhi - 110032 Phone: 011-39893990,30210601 Fax: 011-30210680 E-mail: nro@icai.org |

IMPORTANT: CA students can pursue Graduate/ Post Graduate Courses as well as MBA through distance learning programme from the Universities with whom the Institute has signed Memorandum of Understandings (MOUs). These Universities are IGNOU, Bharatiar University, University of Madras and Netaji Subhas Open University (NSOU). For further details, please visit Institute's website www.icai.org.

^{**} To be charged only once at the time of initial registration.

INSTRUCTIONS FOR FILLING THE FORM

PLEASE FOLLOW THE SIMPLE STEPS WHILE FILLING THE FORMS

- 1. Use the **BLACK BALL PEN** to fill the details and to sign the form.
- 2. Do not put any stray marks on Black Squares and Barcode.
- 3. Fill complete circles for the selected options else leave it blank if not applicable as shown in the example:

| Wrong Method Sex & Male | O Female | | |
|-------------------------|--------------------------------|------------------|----------|
| Special Category | Ø Gen ○ SC/ST ○ Backward class | O OBC O Disabled | O Others |
| Right Method | | | |
| Sex Male | O Female | | |
| Special Category | Gen O SC/ST O Backward class | O OBC O Disabled | O Others |
| | CORRECT METHOD | WRONG METHODS | |

4. Write clearly within the boxes, as indicated in the following example:



- 5. Do not over write.
- 6. Please write the date in DD-MM-YYYY format.
- 7. Do not bend/fold the form.
- 8. Please refer the table below for State Codes.

| STATE/UT CODE | STATE/UT NAME |
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| AN | ANDAMAN AND NICOBAR |
| AP | ANDHRA PRADESH |
| AR | ARUNACHAL PRADESH |
| AS | ASSAM |
| ВН | BIHAR |
| СН | CHANDIGARH |
| CG | CHHATISGARH |
| DN | DADRA AND NAGAR HAVELI |
| DD | DAMAN & DIU |
| ND | DELHI |
| GA | GOA |
| GJ | GUJARAT |
| HR | HARYANA |
| HP | HIMACHAL PRADESH |
| JK | JAMMU & KASHMIR |
| JH | JHARKHAND |
| KR | KARNATAKA |
| KL | KERALA |

| STATE/UT CODE | STATE/UT NAME |
|---------------|------------------------|
| LK | LAKSHADEEP |
| MP | MADHYA PRADESH |
| MH | MAHARASHTRA |
| MN | MANIPUR |
| MG | MEGHALAYA |
| MZ | MIZORAM |
| NG | NAGALAND |
| OR | ORISSA |
| PN | PONDICHERRY |
| PB | PUNJAB |
| RJ | RAJASTHAN |
| SK | SIKKIM |
| TN | TAMIL NADU |
| TR | TRIPURA |
| UP | UTTAR PRADESH |
| UT | UTTARAKHAND/UTTRANCHAL |
| WB | WEST BENGAL |