**PERFORMA\_F**



DECLARATION OF STUDENT REGSITERED FOR CS COURSE

(To be filled by the Student in his/ her own handwriting and submitted the ICSI Counsellor)

Photograph

Name of the Student:

Father / Mother Name:

Contact Number:

Email Id:

Course in which registered:

CS Foundation Programme / CS Executive Programme

Registration No.:

Counseling by (Name of the Counsellor):

**I declare that the information on CS Course and profession has been provided by \_\_\_\_\_\_\_\_\_\_\_\_ (Name of the Counsellor). He has motivated me to join the CS Course.**

**Place:**

**Date: Signature**