

Ack. No.

Date :



**THE INSTITUTE OF  
Company Secretaries of India**  
IN PURSUIT OF PROFESSIONAL EXCELLENCE  
Statutory body under an Act of Parliament

SOUTHERN  
INDIA  
REGIONAL  
COUNCIL

**APPLICATION FORM FOR ADMISSION TO PROFESSIONAL PROGRAMME  
ORAL COACHING CLASSES**

Name : \_\_\_\_\_

Registration Number : \_\_\_\_\_

Qualification : \_\_\_\_\_

Address for Communication : \_\_\_\_\_

Pin : \_\_\_\_\_ Ph: (O) : \_\_\_\_\_ (R) \_\_\_\_\_

Mobile : \_\_\_\_\_ E-mail : \_\_\_\_\_

Occupation Address, if any, along with designation etc. : \_\_\_\_\_

Details of passing the Intermediate/Executive Programme : Group/Module Roll No. \_\_\_\_\_ Session & Year : \_\_\_\_\_

: i. \_\_\_\_\_

: ii. \_\_\_\_\_

Details of exemption (s) obtained / claimed, if any for final : \_\_\_\_\_

Applied for (tick whichever is applicable) :

Module - I  
6600/-

Module - II  
6600/-

Module - III  
5500/-

I submit herewith a sum of Rs. \_\_\_\_\_ for module towards Oral Coaching Tuition fee for professional Programme

I hereby declare that the information given above are correct to the best of my knowledge and I undertake to abide by the rules and regulations relating to the Oral Coaching Scheme.

Place :

Date :

Signature