



**THE INSTITUTE OF  
Company Secretaries of India**

**भारतीय कम्पनी सचिव संस्थान**

**IN PURSUIT OF PROFESSIONAL EXCELLENCE**

Statutory body under an Act of Parliament



### **50<sup>th</sup> MANAGEMENT SKILLS ORIENTATION PROGRAMME [MSOP]**

The Noida Chapter of NIRC of ICSI announces its **50<sup>th</sup> MANAGEMENT SKILLS ORIENTATION PROGRAMME [MSOP]** from 7<sup>th</sup> February, 2019 to 23<sup>rd</sup> February, 2019.

***The last date of registration is 4<sup>th</sup> February, 2019.***

Date	Venue	Contact
7 <sup>th</sup> February, 2019 to 23 <sup>rd</sup> February, 2019	ICSI House C-36, Sector-62, Noida -201309	Executive Officer, The Institute of Company Secretaries of India - Noida Chapter, C-37, Sector – 62, Noida - 201309 Phones: 0120-4522058 Email: <a href="mailto:noida@icsi.edu">noida@icsi.edu</a>

1. Participation fee is **Rs. 6,500/- [Six Thousand Five Hundred Only]**.
2. Participants have to take care of the accommodation at their own.
3. Fee Can be deposited online in following account:

**a. Corporation Bank**

**Name of the Account: Noida Chapter of NIRC of ICSI Account**

**No. – 520101064400065**

**IFSC Code: CORP0001170**

**Branch Name: Sector – 62 Branch, Noida – 201307**

Please mail the copy of fee deposit receipt / NEFT transaction confirmation receipt and soft copy of duly filled Application form along with the necessary documents as mentioned in the annexure I **(in One/Single PDF file)** on the email [noida@icsi.edu](mailto:noida@icsi.edu). Uncompleted form will not be accepted. Students Paying the Fees Online are requested to submit the hardcopies of the form along with the required attachments on the 1<sup>st</sup> day of MSOP. The Chapter reserves the right to postpone it, in case of administrative difficulty.

With Best Regards			
<b>CS Shivam Rastogi (Chairman)</b>	<b>CS Nand Lal Thakur (Vice Chairman)</b>	<b>CS Dhruv Khandelwal (Secretary)</b>	<b>CS Pankaj Grover (Treasurer)</b>
<b>CS Preeti Grover (Member)</b>	<b>CS Manpreet Singh (Member)</b>	<b>CS Nikhil Verma (Member)</b>	<b>CS Kushal Kumar Programme Co-ordinator</b>



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Name of the Regional Council / Chapter: .....

<b>Name of student :</b>			Registration No. :	Please affix a recent passport size photograph
Particulars of passing Final / Professional Programme Examination : ( Please attach photo copy of pass mark sheet of all groups/modules )			Mobile No:	
			e-mail ID :	
Group/Module	Session of passing	Roll No.	<b>Address for correspondence :</b>	
Professional Prog. Group/Module-I				
Professional Prog. Group/Module-II				
Professional Prog. Group/Module-II				
Professional Prog. Group/Module-IV				
Executive Prog. Module I				
Executive Prog. Module II				

**Details of trainings ( undergone / or exempted )**

(If undergone, please attach copy of "Training Completion Certificate". If exempted, please attach copy of institute's training exemption letter)

Earlier Training Structure			Modified Training Structure		
(i) Management Training / Apprenticeship Training ( Regulation 48 )	12 months	Undergone/ Exempted	Management Training / Apprenticeship Training ( Regulation 46AB )	12 months	Undergone/ Exempted
(ii) Practical Training			<b>Are you employed?</b> ( please mention followings ) Designation : Office Address :  Telephone No. (Office) :		
(a) Secretarial / Legal Deptt.	1 month	Undergone/ Exempted			
(b) Finance / Accounts Deptt.	1 month	Undergone/ Exempted			
(c) Personnel & Admin Deptt.	1 month	Undergone/ Exempted			
(d) Specialized training ( ROC/SE/FI etc)	15 days	Undergone/ Exempted			

**Details of EDP** ( please attach copy of completion certificate )

Place :	From	To	
<b>Details of PDP</b> ( please attach copy of completion certificate )			
	Place	PDP hours granted	Date of programme
(i)			
(ii)			
(iii)			
(iv)			

**Details of MSOP Fees paid** ( If paying through demand draft, it should be drawn in favour of "....." payable at "....." )

Amount :	DD No. /CASH RECEIPT No. :	Date :	Bank:
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**Declaration by student**

I solemnly declare that whatever I have stated above is true & correct and hereby undertake that I shall abide by the training requirements/norms of the Institute.

Place :

Date :

Signature of student

**For Office use only ( at respective Regional Office / Chapter )**

Received by :	Receipt No.	Date of receiving :	Signature of MSOP Co-ordinator of RO/Chapter :
Signature of dealing Assistant			

### Enclosures

Enclosures for those who have completed 15 months management training	Put a tick mark	Enclosures for those who are exempted from undergoing management training	Put a tick mark
1. Application form in the prescribed format.		1. Application form in the prescribed format.	
2. Copy of Final / Professional & Executive/Intermediate Programme passing certificate		2. Copy of Final / Professional & Executive/Intermediate programme passing certificate	
3. Copy of Institute's <b>sponsorship letter</b> for undergoing training <b>15/12/24/36 Months</b> Training.		3. Copy of the exemption letter from the Institute.	
4. Copy of Training Orientation Program / Executive Development Programme completion certificate.		4. Passport size photograph – 1	
5. Copy of Academic Development Programs / Professional Development Programmes completion certificate.		5. Fee: Cash / DD  Cash Receipt No. :  [or]  DD Details :	
6. Copy of the <b>15/12/24/36 months management Training Completion Certificate.</b>			
7. Passport size photograph – 1			
8. Fee: Cash / DD  Cash Receipt No. :  [or]  DD Details :			