

**APPLICATION FORM**  
**MERIT-CUM-MEANS ASSISTANCE**  
**(Company Secretaryship Course) SCHEME, 1983**  
**(As amended upto 8<sup>th</sup> August, 2023)**

NOTE:

- (i) Candidates must check the eligibility criteria for grant of financial assistance as under:
- (a) Should have passed all papers of Executive Programme Examination without exemption in any paper, at one sitting, in the first attempt;
  - (b) The income of such an applicant, if employed or is having an independent source of income, should not be more than ₹2,40,000/- per annum and if he/she is dependent on his/her parents/guardian/spouse whether partially or wholly, the combined gross family income from all sources should not be more than ₹3,60,000/- per annum;
  - (c) Shall not in receipt of any other scholarship / Financial Assistance for pursuing Company Secretaries Course from the Institute or any other organization.
  - (d) Should have submitted his/her application well within the stipulated period so as it reach the same in the Institute on or before 25<sup>th</sup> November for passing June Examination and 25<sup>th</sup> May of next year for passing December Examination of preceding year.
- (ii) Application form should be filled in neatly and legibly in CAPITAL LETTERS in all respects by the Candidate in his/her own handwriting and signed by the Candidates.
- (iii) Applications not signed by the Candidate or incomplete in any manner or application not accompanied by requisite supporting documents, i.e., proof of Annual Income of the applicant and his/her spouse/parent(s)/guardian(s), Caste Certificate, and/or Medical Certificate wherever applicable, shall summarily be rejected and no correspondence shall be entertained.

To,

The Joint Director

Directorate of Examinations

The Institute of Company Secretaries of India

'ICSI House', C-37, Sector-62 Institutional Area,

Noida – 201 309 (U.P.)

**Sub: Application for Grant of Merit-cum-Means Assistance for pursuing CS Professional Programme under the "Merit-cum-Means Assistance (Company Secretaryship Course) Scheme, 1983**

Sir,

I wish to apply for grant of financial assistance for pursuing studies for Professional Programme under the "Merit-cum-Means Assistance (Company Secretaryship Course) Scheme, 1983", as in force. I am to declare and submit as under:

2. \*I am a *bona fide* registered student of the Institute and my Registration No. is \_\_\_\_\_.
3. \*I am enclosing/have submitted my application for registration as a student on \_\_\_\_\_.  
(Date)
4. I have passed all the papers of Executive Programme Examination held in \_\_\_\_\_ (month/year) under Roll No. \_\_\_\_\_ without exemption in any paper, in one sitting at first attempt.
5. I am enclosing attested copies of following certificate(s)/document(s) [Please tick ] —
  - (i) Mark-sheet in proof of having passed all the papers of Executive Programme examination of the Institute in the first attempt without claiming exemption in any paper;
  - (ii) Income Certificate issued by the employer in proof of my total monthly and yearly income;
  - (iii) Income Certificate issued by the employer/competent Revenue Officer of the State in proof of my spouse's / father's / mother's / guardian's total monthly and yearly income;
  - (iv) Income-tax Return Documents for the immediate preceding year in respect of myself and/or my parents/guardian/spouse;
  - (v) Caste Certificate issued by the appropriate authority if the applicant belongs to SC/ST category; and
  - (vi) Medical Certificate issued by the Surgeon / Medical Officer of a Government Hospital if the applicant belongs to Person with Disability (PwD)/ Divyangjan category.

Yours faithfully,

Place: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

Date: \_\_\_\_\_

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

**\*Delete whichever is not applicable.**

**PARTICULARS TO BE FILLED IN BY THE CANDIDATE IN HIS / HER OWN HANDWRITING**

**Sub: Application for grant of Merit-cum-means Assistance under the  
“Merit-cum Means Assistance (Company Secretaryship Course)  
Scheme, 1983” for Professional Programme**

With reference to my application for grant of Financial Assistance under the “Merit-cum-Means Assistance (Company Secretaryship Course) Scheme, 1983”, as in force, I submit the requisite particulars hereunder:

**I. PERSONAL DETAILS:**

1. Name (In **CAPITAL** Letters) :

\_\_\_\_\_

2. Father’s Name: \_\_\_\_\_

3. Mother’s Name: \_\_\_\_\_

4. Guardian’s Name\* : \_\_\_\_\_

5. Living with (Parents / Guardian / Spouse / Independent): \_\_\_\_\_

6. Date of Birth (DD/MM/YYYY): \_\_\_\_\_ 7. Category SC/ST/OBC/GEN/DISABLED) \_\_\_\_\_

8. Gender (Male / Female): \_\_\_\_\_ 9. Marital Status: \_\_\_\_\_

10. Whether dependent (Yes/No): \_\_\_\_\_ 11. If Yes, on whom (Parents / Guardian / Spouse): \_\_\_\_\_

12. Student Regn. No. for Executive/Professional Programme : \_\_\_\_\_



**II. ADDRESS AND CONTACT DETAILS:**

	<b>Residence</b>	<b>Office (With Designation, if employed)</b>
Address:		
City		
State		
PIN		
Phone (With STD Code)		
Mobile No.		
E-Mail		

**III. DETAIL OF FAMILY MEMBERS:**

<b>Relation</b>	<b>Name</b>	<b>Occupation</b>	<b>Whether you are dependent</b> ( Yes /No and if yes wholly or partially)
Father			
Mother			
Guardian			
Spouse			
Others			

**IV. ADDRESS OF PARENTS / GUARDIAN/ SPOUSE:**

	<b>Residence</b>	<b>Office (With Designation, if employed)</b>
<b>Address:</b>		
<b>City</b>		
<b>State</b>		
<b>PIN</b>		
<b>Phone</b> (With STD Code)		
<b>Mobile No.</b>		
<b>E-Mail</b>		

**V. DETAIL OF FAMILY INCOME FROM ALL SOURCES**

(PLEASE ATTACH CERTIFICATE OF INCOME AS PRESCRIBED):

<b>Relation</b>	<b>Monthly Income (₹)</b>	<b>Annual Income (₹)</b>
<b>Income of Self</b>		
<b>Income of Parents / Guardian / Spouse</b>		
<b>TOTAL INCOME</b>		

**VI. DETAIL OF PAYMENT OF REGISTRATION FEE FOR PURSUING PROFESSIONAL PROGRAMME OF COMPANY SECRETARYSHIP COURSE:**

Stage of Company Secretaryship		Date of Fee Payment:	
Mode of Fee Paid (Online / Bank Pay-in-slip)		Registration Fee (₹)	
Name of Bank:		Education Fee (₹)	
Transaction ID / Bank Pay-in-slip No.		Total Fee paid (₹)	

**VII. BANK ACCOUNT DETAILS FOR DIRECT REMITTANCE OF FINANCIAL ASSISTANCE AMOUNT OF USING ELECTRONIC MODE IN CASE OF AWARD OF MERIT-CUM-MEANS ASSISTANCE :**

Name of Candidate: \_\_\_\_\_ Bank Account No. \_\_\_\_\_  
 IFSC / NEFT Code: \_\_\_\_\_ Branch Address: \_\_\_\_\_  
 Name of Bank: \_\_\_\_\_

**VIII. EXAMINATIONS PASSED** (From Matriculation Examination onwards including Professional Courses):

Sl.No.	Exam Passed	Year of Passing	% Marks Obtained	Rank / Division	No. of Attempt(s) at Exam Passed	Board / University / Institution
1.	X - Class					
2.	XII - Class					
3.						
4.						
5.						
6.						

**IX. NAME OF SCHOOL / COLLEGE / INSTITUTION WHERE I HAVE STUDIED :**

Sl. No.	Exam Passed	Month /Year of Passing	Name of School / College / Institution and City
1.	X - Class		
2.	XII - Class		
3.			
4.			
5.			
6.			

**X. DETAILS OF ENROLMENT IN C.S. EXAMINATIONS :**

Month / Year of Exam	Stage / Module of Exam	Exam Centre	Roll No.	% of Marks obtained and Result (Pass / Fail)

**XI. DETAIL OF COACHING / STUDIES FOR PURSING CS COURSE**

<i>Stage / Module of Exam</i>	<i>Coaching (Oral/Postal)</i>	<i>Individual Private Coaching (Yes/No)</i>	<i>Name of Institution and City</i>

**XII. PRIZE AWARD / SCHOLARSHIP WON BY ME FOR EXHIBITING MERITORIOUS PERFORMANCE IN THE EXAMINATIONS**

(From Matriculation Examination onwards including Professional Courses):

<i>Sl. No.</i>	<i>Name &amp; Stage of Exam Passed</i>	<i>Name of Prize Award/Scholarship</i>	<i>Brief Criteria of Prize/ Scholarship</i>	<i>School / College / Institution and City</i>
1.	X - Class			
2.	XII - Class			
3.				
4.				
5.				
6.				

**XIII. DETAIL OF SCHOLARSHIP/ FINANCIAL ASSISTANCE RECEIVED FROM ANY SOURCE FOR PURSING CS COURSE:**

<i>Stage / Module of Exam</i>	<i>Amount (Per Month / Lump Sum) (₹)</i>	<i>Duration</i>	<i>Name of Institution and City</i>

**XIV. I HEREBY SOLEMNLY UNDERTAKE, DECLARE AND AFFIRM AS UNDER:**

1. I have appeared in the Executive Programme Examination in June/December 20\_\_ for the first time and that I have passed all the papers of the Executive Programme Examination without claiming exemption in any paper held in June/December, 20\_\_\_\_ under Roll No. \_\_\_\_\_.
2. I have not appeared in the Executive Programme Examination of Company Secretaries prior to June/ December 20\_\_ session of Examination.

3. I have attached duly attested copy of (i) Result-cum-Marks Statement of CS Examination for which I intend to apply for Merit-cum-Means Assistance; (ii) Certificate of Income of Individual, Parents / Guardian, Spouse issued by the competent Revenue Officer of the State Government; (iv) Caste Certificate\*, if applicable; (v) Medical Certificate issued by the competent Medical Board, if applicable.
4. I understood that the Institute reserves the right to reject the application, cancel the scholarship / financial assistance awarded or recover the entire amount of Scholarship/ Financial Assistance from me at any time without assigning any reason.
5. The information furnished hereinabove by me are true, correct and complete to the best of my knowledge and belief and nothing is concealed in relation thereto. I shall pursue the course of studies for which I have applied for grant of financial assistance.
6. I undertake, declare and agree that in the event of any information furnished hereinabove by me is found incorrect, incomplete or false, I shall be liable to refund the entire sum of amount received towards Scholarship / Financial Assistance and/ or the Institute shall have right to take any disciplinary action against me under the Company Secretaries Regulations, 1982, as in force, including cancellation of my registration as student in addition to other legal action(s) under the applicable legal provisions.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Candidate)

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

### **COUNTER SIGNATURE OF**

Member of Parliament/ Member of Legislative Assembly/  
Member of the Institute (ACS/FCS)/  
Magistrate / Munshiff / Notary Public /  
Gazetted Officer / Employer Organisation

\_\_\_\_\_  
(Counter Signature)

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

Designation : \_\_\_\_\_

Official Seal / Rubber Stamp :

Professional Membership No. (if any) : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\* Delete whichever is not applicable

## **INCOME DECLARATION**

I, \_\_\_\_\_  
son/daughter of Shri \_\_\_\_\_  
resident of \_\_\_\_\_  
Town/City \_\_\_\_\_ State \_\_\_\_\_ PIN : \_\_\_\_\_  
solemnly declare that —

- (i) my monthly total income is ₹ \_\_\_\_\_ (Salary\*/Income\* Certificate enclosed.)
- (ii) the monthly total income of my parents (both father & mother)\*/guardian\*/spouse\* is ₹ \_\_\_\_\_ (Salary\*/Income\*/Pension\* Certificate enclosed).
- (iii) the yearly combined income of my parents (both father & mother)\*/guardian\*/spouse\* and myself from all sources is ₹ \_\_\_\_\_ (Rupees \_\_\_\_\_).
- (iv) the declaration given above is correct and complete to the best of my knowledge and belief.

Date: \_\_\_\_\_  
Place: \_\_\_\_\_ (Signature of Candidate)  
Name : \_\_\_\_\_

### **COUNTER SIGNATURE OF**

Member of Parliament/ Member of Legislative Assembly/  
Member of the Institute (ACS/FCS)/  
Magistrate / Munshiff / Notary Public /  
Gazetted Officer / Employer Organisation

\_\_\_\_\_  
(Counter Signature)  
Name : \_\_\_\_\_  
Designation : \_\_\_\_\_

Official Seal / Rubber Stamp :

Professional Membership No. (if any) : \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** DECLARATION OF INCOME MUST BE SUPPORTED BY ATTESTED COPY(IES) OF SALARY CERTIFICATE(S) / PENSION CERTIFICATE / INCOME-TAX RETURN DOCUMENTS AND/OR IN LIEU THEREOF AN AFFIDAVIT ON A STAMP PAPER OF ₹ 10, DULY ATTESTED BY A NOTARY PUBLIC/ MAGISTRATE AS OTHERWISE THE APPLICATION FOR AWARD OF MERIT-CUM-MEANS ASSISTANCE WILL BE LIABLE TO BE REJECTED.

## CASTE CERTIFICATE

This is to certify that Mr./Miss/ Mrs. \_\_\_\_\_,  
son/daughter of \_\_\_\_\_,  
resident of \_\_\_\_\_,  
belongs to \_\_\_\_\_ Caste/Tribe which is recognised as a Scheduled  
Caste/Tribe.

2. Mr./Miss/Mrs. \_\_\_\_\_ and/or  
his/her family ordinarily reside in village/town \_\_\_\_\_ of  
\_\_\_\_\_ District/Taluk of the State/Union Territory of  
\_\_\_\_\_.

Date: \_\_\_\_\_  
Place: \_\_\_\_\_ (Signature) .

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

Designation\*: \_\_\_\_\_

Official Seal:

\*Officers competent to issue Scheduled Caste/Tribe Certificate —

- (i) District Magistrate/Additional District Magistrate/ Collector/  
Deputy Commissioner/ Additional Deputy Commissioner/Deputy  
Collector/ First Class Stipendiary Magistrate/ City Magistrate/  
Executive Magistrate/ Extra Assistant Commissioner (not below the  
rank of First Class Stipendiary Magistrate).
- (ii) Chief Presidency Magistrate/Additional Chief Presidency  
Magistrate/Presidency Magistrate.
- (iii) Revenue Officers not below the rank of Tehsildar
- (iv) Sub-divisional Officer of the area where the candidate and/or  
his/her family normally resides.

**NOTE :** THE CASTE CERTIFICATE IS REQUIRED TO BE SUBMITTED BY THE SCHEDULED CASTE/TRIBE CANDIDATE  
ALONG WITH HIS/HER APPLICATION AS OTHERWISE THE APPLICATION FOR AWARD OF MERIT-CUM-  
MEANS ASSISTANCE WILL BE LIABLE TO BE REJECTED.