



**EMPANELMENT AS PEER REVIEWER**

**PROFORMA FOR INCLUSION OF NAME IN THE PANEL OF “PEER REVIEWERS”  
CONSTITUTED UNDER THE AEGIS OF “PEER REVIEW COMMITTEE, ICSI”**

The Guidelines for Peer Review attestation services by Practicing Company Secretaries have been issued by the Council of the Institute at its 202<sup>nd</sup> Meeting held on August 25-26, 2011. The Peer Review Committee has decided to seek from amongst its members in practice, to empanel themselves as “Peer Reviewer”. The qualifications prescribed for appointment of Reviewer are as follows:

- (a) be a member with at least 10 years of post -qualification experience as Company Secretary; and out of the 10 years of post-qualification experience, should have been in practice for a continuous period of not less than five years at the time of empanelment;
- (b) be currently holding Certificate of Practice as issued by the Institute;
- (c) have undergone the Training Programme for Peer Reviewers and qualified the Certification Programme for Peer Reviewers organized by the Institute.

Peer Reviewers empanelled till date may continue to undertake peer review assignments accepted by them upto 31<sup>st</sup> March, 2026 without completing the online certification programme, but shall complete the said online certification programme successfully to undertake peer review assignments after 31<sup>st</sup> March, 2026.

Further to be empanelled as Peer Reviewer, a member shall not have: -

- (a) disciplinary action / proceedings pending against him during the past 3 years;
- (b) been found guilty of professional or other misconduct by the Committee of Discipline / Disciplinary Committee, at any time, as the case may be;
- (c) been convicted by a Competent Court whether within or outside India, of an offence involving moral turpitude and punishable with imprisonment.

Members who are desirous of being empanelled and to carry out Peer Review of their contemporaries in practice would require to register themselves as a Peer Reviewer with the Institute.

With the object of identifying those members who are desirous of being empanelled, this information is being floated to seek details of the members who wish to be registered with the Institute as Peer Reviewer and assigned to carry out Peer Review from time to time. Members fulfilling the eligibility criteria and desirous of being empanelled are requested to submit the attached proforma with all relevant details to enable the Committee to consider their request.

The duly filled in proforma may be sent to - The Secretary, Peer Review Committee, The Institute of Company Secretaries of India, ICSI HOUSE, 22, Institutional Area, Lodi Road, New Delhi 110 003 (email: prb-icsi@icsi. edu).

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To,  
The Secretary,  
Peer Review Committee  
The Institute of Company Secretaries of India  
ICSI House  
22, Institutional Area  
Lodi Road  
NEW DELHI – 110 003

1. Name (In CAPITAL Letter)	F I R S T	M I D D L E	S U R N A M E
2. Membership no. of the Institute	A/F	3. Date of obtaining Membership (DD/MM/YYYY)	/ /
4. Date of Birth (DD/MM/YYYY)	/ /	5. Gender (M/F)	6. C.P. Number

7. Contact details in CAPITAL letters:

(a) Residential Address: ..... ..... ..... City ..... State .....  Phone No. .... STD Code: ..... Mobile No. .... E-mail ID: .....	(b) Professional Address: ..... ..... ..... City ..... State .....  Mobile No. .... FAX No. .... Website Address: ..... Unique Code of Firm: .....
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<p>8. Firm's Details</p> <p>(a) Name of your Firm</p> <p>(b) Nature of Firm – Individual / Proprietorship/ Partnership/ LLP</p> <p>(c) Name(s) of Firms with which you are associated as a Partner or Associate.</p>	
<p>9. In the event of Partnership/LLP, please mention names of other partners:</p>	<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p>
<p>10. Any past experience of carrying out Peer review work or work of similar nature.</p>	

I hereby declare that:

- (a) I am a member of the ICSI
- (b) Possess at least Ten Years' experience as Company Secretary.
- (c) I am currently holding certificate of Practice issued by the Institute and have been in continuous practice for a period of not less than five years.
- (d) The particulars given above are true and correct to the best of my knowledge and belief.
- (e) I shall abide by the times schedule and 'Statement of Confidentiality' in the conduct of Peer Review.

Place .....

Date .....

<b>FOR OFFICE USE ONLY</b>		
Acknowledgment No.	Acknowledgment Date	Reviewer Registration No.