



THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA

APPLICATION FORM FOR GRANT OF SCHOLARSHIP

FORM -3

The Director of Studies,
The Institute of Chartered Accountants of India,
A-94/4, Sector – 58,
Post Box No. 36,
NOIDA - 201 301 (U.P.)

Dear Sir,

I hereby apply for the grant of Merit-cum-Need Scholarship/Need-based Scholarship under the Chartered Accountants Students' Scholarship Scheme or any other Endowment Scholarship*. I give below the relevant particulars for your consideration. I understand that the information contained herein forms the basis for the grant of the scholarship and that, if the information is found to be wrong, the scholarship may be withdrawn immediately without prejudice to the recovery of the amounts already advanced to me.

PARTICULARS

- | | | | |
|----|---|----------------------|--|
| 1. | Name in full
(CAPITAL LETTERS) | _____ | <div style="border: 1px solid black; padding: 10px; text-align: center;">Affix latest
photograph
(Passport size)</div> |
| 2. | Registration No. | _____ | |
| 3. | Date of Birth | _____ | |
| 4. | Full Address | _____ | |
| | (a) Present | _____ | |
| | | _____ | |
| | | _____ | |
| | | _____ Pin Code _____ | |
| | (b) Permanent | _____ | |
| | | _____ | |
| | | _____ Pin Code _____ | |
| 5. | (a) Father's/Guardian's Name in full | _____ | |
| | (b) Address | _____ | |
| | | _____ | |
| | (c) Occupation (Service/Business/Other means of livelihood). Please furnish below the name of the organisation and designation of the post held, name of the firm and nature of business carried on or other relevant particulars as may be applicable. | _____ | |
| | | _____ | |
| | | _____ | |
| 6. | Total yearly income of parents/guardian from all sources | _____ | |
| | (See Form No. 4 given at the end of this application) | _____ | |
| 7. | Particulars of passing the SSC/University Examination and/or PE-I/CPT/PE-II/PCC Course Examination of the Institute. | | |
| | (i) Examination passed | _____ | |
| | (ii) Name of the University/Institution | _____ | |
| | (iii) Aggregate of marks secured in Degree Course | _____ | |
| | (iv) Percentage of marks _____ (Please enclose photocopies of marks sheets of SSC, I, II and III years of Graduation/CPT/PE-I/PE-II/PCC Examination). | | |

8. (a) Name, Membership Number and address of the Chartered Accountant under whom the candidate is receiving training under the Chartered Accountants Regulations. (if applicable)
- _____
- (b) Date of Commencement of Articles _____
- (c) Date of completion _____
- (d) Date of first eligible attempt for Exam _____
9. Particulars of the Scholarship or financial assistance received from other sources :
- Name of the Institution _____
- Amount _____ Period _____
10. List of the documents attached.
- (i) _____
- (ii) _____
- (iii) _____
11. Whether you belong to Scheduled Caste/Scheduled Tribe, if so, furnish documentary evidence. Please write 'OBC' in case you belong to OTHER BACKWARD CLASSES.

I hereby declare that the statements made by me in this application form are true to the best of my knowledge and belief. I further agree to abide by the terms and conditions of the award if I am selected for the Scholarship applied for.

(Signature of the student)

Place _____

Date _____

(For students undergoing Articled Training)

Certified that Shri/Ms. _____ was admitted in our service as an articled/audit clerk from _____ and that he/she would be completing the prescribed period of training under the Chartered Accountants Regulations on _____.

Signature of the Member

Membership No. _____

Name _____

(Name of the Firm)

Address _____

Date _____

For students without Articleship

CERTIFICATE

This is to certify that Shri/Ms. _____ (Reg. No. _____) is continuing to be a student of PE-I/PE-II Course of ICAI. His/her conduct has been satisfactory.

Signature of the member of the Institute/

(Membership No.)

Head of Educational Institution/Gazetted Officer

Address:

Date :

Seal

FORM-4

I, _____ father/guardian of _____ who has applied for the grant of Merit-cum-Need-Based/Endowment Scheme Scholarship declare that my total annual income, including the income of my wife and of son/ward, in the preceding year ended 31st March, 200____ was Rs. _____.

(Signature)

Name _____

Date _____

(To be signed in the presence of a Magistrate/Oath Commissioner/Notary Public who would also affix his signature and seal).

(Signature)