

**PROCEDURE FOR APPLYING FOR CERTIFIED PHOTOCOPIES OF
EVALUATED ANSWER SCRIPTS FOR THE EXAMINEES OF THE INSTITUTE
OF COST ACCOUNTANTS OF INDIA**

1. APPLICABILITY :

The procedure detailed below will be applicable from the June 2013 Examination onwards and the certified photocopies of the answer scripts would be provided **only** to the concerned **examinee** of this Institute.

2. PROCEDURE :

An examinee can apply for obtaining his/her certified evaluated answer scripts in the prescribed format given in **Annexure – 1**.

3. FEES :

All the applications must be accompanied with a Demand Draft of **Rs. 500/- per paper** payable at Kolkata drawn in favour of “**THE INSTITUTE OF COST ACCOUNTANTS OF INDIA**”.

4. TIME LIMIT FOR APPLICATION :

The application along with the prescribed fees should **reach** the Institute positively **within Sixty (60) days** from the date of declaration of results of the concerned examination.

5. ADDRESS FOR SENDING THE APPLICATION :

All the applications for obtaining the photocopy of the evaluated answer scripts should be sent in a sealed envelope clearly mentioning “ **Application for Obtaining Photo copy of the Evaluated answer scripts**” on the top of the envelope and should be send to the following address only

Director (Examination)
THE INSTITUTE OF COST ACCOUNTANTS OF INDIA
CMA BHAWAN
12, SUDDER STREET.
KOLKATA -700016.

Certified copies of the answer scripts will be generally sent **within 30 days** from the date of **receipt of application**.

7. USAGE OF THE CERTIFIED ANSWER SCRIPTS AND VERIFICATION PROCESS :

The certified answer scripts obtained by a particular examinee shall be exclusively for his/her academic guidance only and not for any other purpose.

If an examinee also applies for Verification of Marks as per the rules of the Institute, the photo copy of the answer scripts will be provided only after the verification process is completed.

8. CONTACT DETAILS : Any query exclusively relating to obtaining photocopy of the answer scripts only can be made at 033-22521034/1035 and at the following Email ID **exam.helpdesk@icmai.in**.

ANNEXURE - 1

FORMAT OF APPLICATION FOR OBTAINING CERTIFIED ANSWER SCRIPT

Sl. No	Particulars	Details
1.	NAME OF THE EXAMINEE	
2.	ADDRESS OF THE EXAMINEE	
3.	EMAIL ID	
4	LANDLINE NUMBER	
4.	MOBILE NUMBER	
5.	REGISTRATION NUMBER (NEW 11 DIGIT NUMBER ONLY)	
6.	GROUP AND TERM OF EXAMINATION	
7.	ROLL NUMBER	
8.	NAME OF THE PAPERS FOR WHICH PHOTOCOPY IS REQUESTED (WRITE FULL NAME OF THE SUBJECTS, NO ABBREVIATIONS ARE ALLOWED)	
9	DD NUMBER AND DATE ALONG WITH THE AMOUNT AND NAME OF THE BANK BRANCH	

DATE :

FULL SIGNATURE