THE INSTITUTE OF Company Secretaries of India
IN PURSUIT OF PROFESSIONAL EXCELLENCE
Statutory body under an Act of Parliament

Name of Regional Council: Southern India Regional Council

Application form for admission in "2 days Induction"

2 DAYS INDUCTION academic program

(Applicable for students who have passed/completed Executive Program in June 2015 session of exam or afterwards)

(To be completed within 3 months of passing Executive program or within 2 months of commencement of their 15 months/1 year/2 years training whichever is earlier. If, any student is already undergoing training on the date of passing the Executive program, in such case two months criteria is not applicable to him/her)

Name of student :			Registration No. :	Please affix a recent passport size photograph
Particulars of passing Executive 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.	**Address for correspondence :**	
Group/Module-I				
Group/Module-II				

Date of passing/completing Executive Program (If student has passed/completed Executive Program before 25.08.2015, in such case 15 days Academic Program (i.e. 2 days Induction+ 3 days e-Governance+ 5 days Skill Development+ 5 days Entrepreneurship Development) is not applicable to him/her)	Date :
Date of Commencement of 15 months/1 year/2 years/3 years training	Date:
Name of Company/PCS where undergoing training	:

Details of "2 days Induction" Fees paid (If paying through demand draft, it should be drawn in favour of "……" payable at "…….")

Amount :	DD No. /CASH RECEIPT No. :	Date :	Bank:

Declaration by student

I _____ do hereby declare that the particulars given above are true to the best of my knowledge and belief. I also agree that providing false particulars amounts to misconduct and if any misconduct is observed on my part, I shall abide by the decision of the Council which may suspend or cancel my registration as a student or may suspend or debar me from appearing in anyone or more examinations of the Institute or direct that any period of training already undergone shall not be reckoned or declare that I am not fit and appropriate person to be admitted as an Associate Member of the Institute.

Place :
Date : Signature of student

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

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