

FORM 'DIPLOMA'



The Institute of Chartered Accountants of Pakistan

APPLICATION FOR ADMISSION TO IFRS DIPLOMA EXAMINATION

Session: Summer / Winter \_\_\_\_\_

Roll No.

(For Office Use Only)

Examinations Centre:	KAR	HYD	FAI	ISD	LAH	MUL	PES	SKT
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(Tick the appropriate box. Examination Centre one declared can only be changed if request is received by Examinations Department ten <10> days before the commencement of examinations.)

CRN No. or Membership No. \_\_\_\_\_

One Photograph  
1" x 1"

Attested at back  
(To be stapled)

1- Name: \_\_\_\_\_

2- Father's Name \_\_\_\_\_

3- Date of Birth: \_\_\_\_\_

4- Communication Address:				5- Permanent Address:			
Phone#:		Cell#:		Phone#:		Cell#:	
E-mail:				E-mail:			

Enclose Blue Copy of paid Bank Credit Voucher for:

Rs.15,000/- for both Papers

Rs.10,000/- for Paper I

or Paper II

(Mark ✓ on relevant box)

Signature of Candidate:

Signature should not  
excess from the box

Signature of Candidate:

Signature should not  
excess from the box

Name of Application Receiving Officer \_\_\_\_\_ Date: \_\_\_\_\_

CANDIDATE COPY

(Acknowledgement receipt for IFRS Diploma Examination (June / December 200\_\_))

Received from \_\_\_\_\_  
(Student's Name)

CRN No. or Membership No. \_\_\_\_\_

Date: \_\_\_\_\_ Application Received by \_\_\_\_\_  
(ICAP Officer Sign and Stamp)