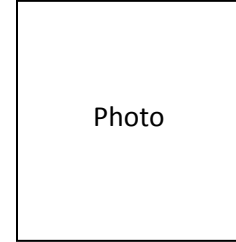


Annexure -2
Application for Registration for the Accounting Technician Course

Registration No. :

Date of Registration:



To,

Accounting Technician Board

I hereby apply for registration for the Accounting Technician Course. My academic and other details are as follows.

1. Full Name (in capital letters):
Name in Nepali:
2. Date of Birth:
3. Address: (a) Permanent:
(b) For Correspondence:
4. Father's/ Guardian's Name & Address:

Academic Qualification:

Examination	Year	Board/University	Marks Scored	Total % Scored	Division/Grade

5. If passed Chartered Accountancy Education CAP-I / Foundation Course, quote the year and Roll No.

6. Details of fees paid: Rs. Cash or in
Bank, Account No. Voucher No. Date

I declare that the particulars given above are true. I shall undertake to abide by the provisions prescribed by the Accounting Technician Board, as may be in force from time to time. I further agree not to pass on, sell or gift away any study paper or any other material provided to me by the Institute.

Signature of the Applicant

Date :