

Application Form for Accounting Technician Examination

Latest PP Size
Photo Candidate
should affix
his/her specimen
signature on the

To,
Accounting Technician Board

I request for permission to present myself at the Accounting Technician Course Examination of September 2024. I declare that the facts and information given below are complete and correct. I also undertake to abide by regulations framed by the Accounting Technician Board for the guidance of candidates appearing in the Examination.

A. NAME (Mr./Ms.)

B. FATHER'S NAME

C. REGISTRATION NO.

D. DATE OF REGISTRATION

E. Medium of Exam (Language Opted): ENGLISH NEPALI

F. If appeared in previous examination quote the Roll No./Year/Month
1. 3.
2. 4.

G. If any Exemption in any paper(s) is (are) granted, quote: Roll No./Year/Month the subject and marks:

1. Roll No./Year/Month:	Subject:	Marks:
2. Roll No./Year/Month:	Subject:	Marks:
3. Roll No./Year/Month:	Subject:	Marks:

H. Subjects for Examination:
Paper 1.
Paper 2.
Paper 3.
Paper 4.
Fees Details:Paper @Rs.per paper = Rs.
Examination Center:

I. WHETHER YOU WANT TO HAVE YOUR MARKSHEET SENT
BY POST: YES/NO
(If yes, please fill up the postal address below)

NAME:

ADDRESS:

Applicant's Signature:
Date:
Contact No.:

(To be filled by Board)

Receipt No:

Approved by:

Checked by:



THE INSTITUTE OF CHARTERED ACCOUNTANTS OF NEPAL
Admit Card

Registration No. _____

Roll No. _____

Admit Card for Accounting Technician Examination, September 2024

<p align="center">LATEST PHOTO ONLY</p> <p>Candidates should affix their signature in the photograph without smearing the face. Photographs should be pasted, not stapled. Photographs should be countersigned by the Secretary.</p>	<p align="center">(To be filled in by the Candidate in Capital Letters)</p> <p>Name of Candidate:</p> <p>Specimen Signature of Candidate.....</p> <p>Attestation Certificate : (by a Member/ Officer of the Institute or the Principal)</p> <p>I hereby certify that the photo attached is that of Mr./Ms.</p> <p>and has signed in my presence on the photo as well as in the space provided for the purpose.</p> <p>Name of the Principal/ Member/ Officer :Membership No.</p> <p>Signature Seal</p>
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Mr./Ms. is permitted to enter the Examination Hall at Center

Date _____

Examination Division

THE INSTITUTE OF CHARTERED ACCOUNTANTS OF NEPAL
Admit Card



Registration No. _____

Roll No. _____

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Examination Division

Record of answer books tendered at the Examination Centre

S. No	Date	Subject	Name of Invigilator	Signature of Invigilator
1		Paper 1– Advanced Accounting and Management Accounting		
2		Paper 2– Audit and Assurance		
3		Paper 3– Corporate and Other Laws		
4		Paper 4– Tax Laws		

Seal of Examination Centre

NOTE:

1. Corrections with fluids are not permitted

CAUTION INVIGILATORS

Kindly do not sign in advance and sign only on actual receipt.

Counter Signature of
Superintendent

Record of answer books tendered at the Examination Centre

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