

GMCS-1 Form

Batch No:- _____ Date: _____ Venue: _____

To be filled by the office

SL No. _____ Received Rs- _____

Registration No. for course on GMCS-I

Receipt No. _____ Dated _____

BOARD OF STUDIES

APPLICATION FORM FOR REGISTRATION FOR THE COURSE ON GENERAL MANAGEMENT & COMMUNICATION SKILLS-I

Registration No.

1. Name of the Student

First Name

Middle Name

Surname

Maiden Name

(in case of married female students)

2. Sex (Please Tick)

☐

MALE

☐

FEMALE

3. Date of Birth

Day

Month

Year

**Affix Recent
Passport size
Photograph**

4. Father's Name

5. Permanent Address

City:

Pin:

Address for Communication

City:

Pin:

Telephone No.

E-mail:

6. Details of Fee

Bank Draft / Pay Order No. Date Rs.
Drawn on Bank Branch

I declare that the particulars given above are true and correct to the best of my knowledge and belief.

Date
Signature of the Applicant
Place Name

FOR OFFICE USE ONLY

Checked and verified that the application is complete in all respect with supporting documents.
Dealing Assistant Officer-in-Charge

GMCS-1

**THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA
Vasai Branch of WIRC**

Amruta Building, Indralok Phase-II, New Golden Next Road, Bhayandar(E), Dist-Thane.

Tel. 022-65568900/65568901

Email:-vasaibranch@gmail.com. Website: www.vasai-icai.org

(To be filled in by the applicant)

Batch Sl. No.

Along with Demand Draft / Pay Order.

No. for Rs. (in words)

Drawn on (Bank)

From Mr./Ms.

Date

Place

Signature, Name & Designation
with seal of receiving office

Note:- Once Registration done, transfer and Refund will not done in any circumstances
DOCUMENTS TO BE ENCLOSED :

- 1) DEMAND DRAFT OF **RS. 5500/-** IN FAVOUR OF “Vasai Branch of WIRC of ICAI.” Payable at **Mumbai**
- 2) ONE PHOTOGRAPH TO BE AFFIXED ON THE FORM
- 3) ARTICLE SHIP REGISTRATION LETTER **OR** FRONT PAGE COPY OF ARTICLE SHIP FORM 102 & 103.
- 4) DRESS CODE:- BOYS- SHIRT & TROUSER WITH TIE FORMAL SHOES. GIRLS- BUSINESS SUIT OR SALWAR SUIT.