

**The Institute of Chartered Accountants of Sri Lanka**  
**Certified Tax Advisor**  
**APPLICATION FORM – CTA ADVISORY LEVEL**

OFFICE USE ONLY

Course Code:	TAX13
Exemption Code:	TAX12
Member No/ Student / other no	

**PERSONAL INFORMATION**

(PLEASE FILL IN BLOCK LETTERS)

TITLE : Mr. Ms. Mrs. Dr. Other

LAST NAME ..... FIRST NAME.....

FULL NAME: .....  
.....

PERMANENT ADDRESS: .....  
.....

CONTACT NUMBERS: .....

EMAIL ADDRESS : .....

NIC NUMBER : .....

Member No. / CASL student No. ( if any): .....

**EMPLOYER'S INFORMATION**

Name of the Institution : .....

Designation of the applicant: .....

Address : .....

Office Email : .....

### ENROLMENT QUALIFICATIONS

From Awareness Level ☐

Direct Entry ☐

(a) Awareness level (Please indicate the subjects you have passed)

i. ....

ii. ....

iii. ....

(b) If Direct Entry

Please fill following information accurately and submit with copies of your certificates and employer's confirmation (where applicable) along with application form.

NAME OF QUALIFICATION	START DATE (MM/YY)	COMPLETION (DD/MM/YY)	INSTITUTION	CONTENTS

### EMPLOYMENT EXPERIENCE

NAME OF EMPLOYER	START DATE (MM/YY)	COMPLETION (DD/MM/YY)	FULL TIME/ PART TIME	DESIGNATION

### Preregistration Conditions

- 1) Due to limited space recommend early registration and payment to avoid disappointment. Your registration **will not be confirmed** until payment is received.
- 2) Course Fee Rs. 65,000/- and exemption fee Rs.6,000/- should be made (as indicated in the payment plan) prior to the closing date.

**Payment Method** (please tick)

Full Course fee

At the registration **Rs. 65,000 /- + 6,000** (Awareness exemption fee if applicable only).

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Payment Plan

At Registration **Rs. 20,000/- + Rs. 6,000 /-**(Awareness exemption fee) if applicable only (6<sup>th</sup> Jan.2019)

2<sup>nd</sup> Installment **Rs. 25,000/-** (6<sup>th</sup> February 2019)

3<sup>rd</sup> Installment **Rs. 20,000/-** (6<sup>th</sup> March 2019)

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### **DECLARATION:**

I hereby confirm that all details provided herein are true to the best of my knowledge.

.....  
Signature of the applicant

.....  
Date