

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

OFFICE USE ONLY

Payment Code:	TAX10
Student No :	

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PERSONAL INFORMATION

(PLEASE FILL IN BLOCK LETTERS)

TITLE : Mr. Ms. Dr. Other

LAST NAME : FIRST NAME.....

FULL NAME :
.....

PERMANENT ADDRESS:
.....

CONTACT NUMBERS :

EMAIL ADDRESS :

NIC NUMBER :

STUDENT NUMBER :

EMPLOYER'S INFORMATION (If any)

Name of the Institution :

Designation of the applicant:

Address :

Office Email :

Contact Numbers :

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. 28,000/- should be made as to the selected Payment method.
- 3) Submit copy of your A/L certificate/ other qualification along with the application form.
- 4) Cheques should be drawn in favor of “ **The Institute of Chartered Accountants of Sri Lanka**” - (A/C Payee only)
- 5) At the end of the study programme, exam fee of Rs.12,000/(Rs.4,000 per paper x 3 papers) be paid.

Payment Method (please tick)

Full Course fee at the registration ☐ **Rs. 28,000 /-**

Payment Plan ☐

At Registration **Rs. 14,000/-** (on or before 7th July 2019)

Final Installment **Rs. 14,000/-** (on or before 7th August 2019)

DECLARATION:

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

.....
Signature of the applicant

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Date