## **FOUNDATION EXAMINATION – MAY 2022**

## DECLARATION BY THE STUDENT

I	Son/Daughter of
on or before 1st January 2022 or have converted t	hereby declare that I am registered in the Foundation Course of Foundation Course from CPT course on or before 13th March se appearing in 10+2 examination before appearing in Foundation
Accountants of India scheduled to be held in May form are true to the best of my knowledge and be myself that I am eligible to appear in ensuing Feterms and conditions contained therein. I under provisional and subject to verification of my full 1988 and decision of the Council of ICAI. In application form, I understand that I shall be deadmitted / appeared, my admission / result acquired.	bundation examination conducted by the Institute of Chartered of 2022. I hereby declare that the particulars stated in this application belief. I have read the Guidance Notes for candidates and satisfied bundation Exam to be held in May 2022 and I shall abide by the stand that my admission to Foundation and resultthereof shall be filling the eligibility requirements in terms of the CA Regulations, the event of suppression or distortion of any fact made in this nied the opportunity to appear in Foundation Exam and if already ared shall be liable for outright cancellation. I also understand that anal and binding upon me and I shall abide by the same.
Sign of Candidate:S	ign of Parent/Guardian:
Attestation by Member of ICAI /Head of the	he Educational Institution /Gazetted Officer with Seal
before 1st January 2022 / Converted to Foundation 10+2 examination / will be appearing in 10+2 examination / will be appearing will be appearing in 10+2 examination / will be appearing will	do hereby certify that I have verified and satisfied thatthe lation course with the Board of Studies of the Institute onor on from the CPT on or before 13th March 2022 and has appeared in mination before appearing in Foundation Examination and is ulars as furnished have been verified by me and found to be correct me by the candidate.
Date:	Place:
Membership No. of the Member of ICAI (if applied	cable)
Signature of Member of ICAI/Head of Educationa	l Institution / Gazetted Officer:
Telephone Number:	
Office Seal	