

CENTRAL UNIVERSITY COLLEGE

REGISTRATION FORM FOR THE 2011 EXAMINATIONS OF THE
INSTITUTE OF CHARTERED ACCOUNTANTS (ICA) GHANA

Paste passport-size
picture here

Name of Applicant
Surname Other name(s)

Address (Company/Personal)

Tel No. Email

Session (Tick) Day [] Evening [] Week-end []

Present Academic Qualification (Attach a photocopy)

ICA Membership No.

Papers to be registered (tick as appropriate)

PART II

- I. Financial Accounting Practice []
- II. Management Accounting & Control []
- III. Taxation []

NB: Fee payable per paper is One Hundred and Fifty Ghana Cedis (GH ₵150.00)

Month and Year of examination: $\frac{\quad}{(M)} \frac{\quad}{(M)} / 20 \frac{\quad}{(Y)} \frac{\quad}{(Y)}$

Signature of Applicant Date $\frac{\quad}{(D)} \frac{\quad}{(D)} / \frac{\quad}{(M)} \frac{\quad}{(M)} / 20 \frac{\quad}{(Y)} \frac{\quad}{(Y)}$

Note: Completed Registration Form should be returned to the Director, Business Development Centre, Central University College, Accra, together with the appropriate fee in Bankers' Draft payable to the Central University College.

FOR OFFICE USE ONLY

Application fee ₵

Receipt No. Bankers' Draft No.

Form sold by Signature

Date $\frac{\quad}{(D)} \frac{\quad}{(D)} / \frac{\quad}{(M)} \frac{\quad}{(M)} / 20 \frac{\quad}{(Y)} \frac{\quad}{(Y)}$ Form No.

CENTRAL UNIVERSITY COLLEGE

REGISTRATION FORM FOR THE 2011 EXAMINATIONS OF THE INSTITUTE OF CHARTERED ACCOUNTANTS (ICA), GHANA

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Surname Other name(s)

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ICA Membership No.

Papers to be registered (tick as appropriate)

PART III

- | | | | |
|------------------------------|--------------------------|-------------------------------------|--------------------------|
| I. Financial Reporting | <input type="checkbox"/> | III. Cost and Management Accounting | <input type="checkbox"/> |
| II. Public Sector Accounting | <input type="checkbox"/> | IV. Financial Management | <input type="checkbox"/> |

NB: *Fee payable per paper is one hundred and fifty Ghana Cedis (Gh¢150.00)*

Month and Year of examination: ___ ___ / 20___ ___

(M M Y Y)

Signature of Applicant Date / / 20
(D D M M Y Y)

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