

**REGISTRATION FORM
AMFI MUTUAL FUND (ADVISORS) MODULE TEST**

(Two photographs are required. One photograph should be pasted below. On the second photograph write your name and roll number on the reverse and attach it to the application form with a gem-clip - to be used for certificate).

WRITE ALL DETAILS IN CAPITAL LETTERS

FIRST NAME

MIDDLE NAME

LAST NAME

NAME TO BE PRINTED ON CERTIFICATE

DATE OF BIRTH

D D
M M
Y Y Y Y
M / F

ADDRESS

PASSPORT – SIZE
COLOUR PHOTOGRAPH

**PASTE
DO NOT STAPLE**

(CANDIDATE'S SIGNATURE)

CITY/TOWN:

DISTRICT:

PINCODE:

TELEPHONE NUMBER (RESI):
TELEPHONE NUMBER (OFFICE):

EMAIL:

EDUCATIONAL
QUALIFICATION:

Under-Graduate
Graduate

Post-Graduate
Prof. Qualified (C.A., ICWAI)

Other

OCCUPATION:

EXPERIENCE (as an UTI/Mutual Fund Agent):

years

PAYMENT DETAILS: DD should be drawn in favour of “Indian Institute of Capital Markets” and payable at Mumbai Service branch. Only DDs will be accepted. **DO NOT ENCLOSE CHEQUES.**

DD NUMBER:

DD AMOUNT (Rs.):

DD DATE

D D
M M
Y Y Y Y

ISSUING BANK (NAME AND BRANCH):

I request to be registered for the above mentioned test and desire the following:

Centre: _____ Language of Question paper*: _____

*Request for question paper, other than in English, would be met subject to availability at the time of test.

I hereby declare that: (i) I am a bonafide candidate and have complied with all requirements laid down by AMFI; (ii) I abide by all the stipulated rules and regulations; (iii) I am not a DISQUALIFIED candidate and (iv) I do not possess a valid AMFI certificate / ARN. I am aware that I stand DISQUALIFIED if I violate any norms laid down by AMFI. Further, I shall abide by the decision of DISQUALIFICATION by AMFI (based on the invigilator's report). I certify that the above information provided by me is true and correct to the best of my knowledge.

(CANDIDATE'S SIGNATURE)