

Three-month Certificate Course on
Financial Planning & Wealth Management

APPLICATION FORM
(Please fill up using CAPITAL letters)

Name (Mr./Mrs./Ms./Dr.) _____

Date of birth (dd/mm/yyyy): _____

Postal address (alongwith Pin Code): _____

Tel. no. _____ Mobile no. _____ Email: _____

Educational Qualifications: _____

(Minimum –Graduate in any discipline; Proof to be submitted at the time of personal interview)

Occupation: _____

(If in service, please provide designation, nature of work, name & address of employer; If self-employed, please provide details)

I came to know about this course from _____

I am interested in pursuing the Financial Planning & Wealth Management (Three-month Certificate course) and seek admission for the said course. In this regard I enclose a DD/ Pay Order for Rs.300/- favouring INDIAN INSTITUTE OF CAPITAL MARKETS payable at Mumbai. I understand that this fee is non-refundable and payment of this fee does not give me any right of admission into the said course. IICM reserves the right of admission to the course. The details of the enclosed DD/Pay Order is given below:

DD/Pay Order no.	Date	Bank' s Name & Branch	Amount
			Rs.300/-

On a separate sheet send a brief on the following alongwith the application:

- a) My expectations from the course..... (in not exceeding 100 words).
- b) I want admission into Financial Planning & Wealth Management (Three-month Certificate course) because.....(in not exceeding 100 words).

Date:

Place:

(Signature)

Please forward this Application Form, DD/PO and a brief on the above to
Mr. A. V. Sankar, Indian Institute of Capital Markets
Plot No.82, Sector 17, Vashi, Navi Mumbai –400705