**AHMEDABAD BRANCH WICASA**

**ICAI Bhawan, Opp. Aaryan Euphoria, Chanakyapuri Road, Ghatlodia, Ahmedabad-380061**

**Phone. 079-6810 3989, 2768 0537, 946,** [**ahmedabad@icai.org**](mailto:ahmedabad@icai.org)**, www.icaiahmedabad.com**

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**MANAGING COMMITTEE MEMBER 2025-26 APPLICATION FORM**

Recent Latest

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The Chairperson

Ahmedabad Branch of WICASA

ICAI Bhawan, Opp. Aaryan Euphoria,

Chanakyapuri Road, Ghatlodia, Ahmedabad-380061

Dear Sir / Madam,

Being a member of the Ahmedabad Branch WICASA agree to stand for election to be held on 6th April, 2025. I send here with the prescribed fees for Rs.5 /- each.

|  |  |  |
| --- | --- | --- |
| **1.** | **Name of Candidate (in Block Letters)** |  |
| **2.** | **Candidate Registration No.** |  |
| **3.** | **Candidate Full Residential Address** |  |
|  |
|  |
| **4.** | **Candidate Resident Phone No.** |  |
| **Candidate Mobile No.** |  |
| **Candidate Email Id** |  |
| **5.** | **Candidate - Date of Commencement of Article ship Training** |  |
| **6.** | **Candidate - Date of Completion of Article ship Training** |  |
| **7.** | **Candidate - Name of the Principal** |  |
| **Membership No. of the Principal** |  |
| **Full Address of the Principal** |  |
| **Principal Office No.** |  |
| **Principal Mobile No.** |  |
| **Principal Email ID** |  |

**Details of the 1st Proposer**

|  |  |  |
| --- | --- | --- |
| **1.** | **Name of Proposer (in Block Letters)** |  |
| **2.** | **Proposer Registration No.** |  |
| **3.** | **Proposer Full Residential Address** |  |
|  |
| **4.** | **Proposer Resident Phone No.** |  |
| **Proposer Mobile No.** |  |
| **Proposer Email Id** |  |
| **5.** | **Proposer Date of Commencement of Article ship Training** |  |
| **6.** | **Proposer Date of Completion of Article ship Training** |  |
| **7.** | **Proposer Name of the Principal** |  |
| **Proposer Membership No. of the Principal** |  |
| **Proposer Full Address of the Principal** |  |
| **Proposer Principal Office No.** |  |
| **Proposer Principal Mobile No.** |  |
| **Proposer Principal Email ID** |  |
| **8.** | **Proposer Signature** |  |

**Details of the 2nd Proposer**

|  |  |  |
| --- | --- | --- |
| **1.** | **Name of Proposer (in Block Letters)** |  |
| **2.** | **Proposer Registration No.** |  |
| **3.** | **Proposer Full Residential Address** |  |
|  |
| **4.** | **Proposer Resident Phone No.** |  |
| **Proposer Mobile No.** |  |
| **Proposer Email Id** |  |
| **5.** | **Proposer Date of Commencement of Article ship Training** |  |
| **6.** | **Proposer Date of Completion of Article ship Training** |  |
| **7.** | **Proposer Name of the Principal** |  |
| **Proposer Membership No. of the Principal** |  |
| **Proposer Full Address of the Principal** |  |
| **Proposer Principal Office No.** |  |
| **Proposer Principal Mobile No.** |  |
| **Proposer Principal Email ID** |  |
| **8.** | **Proposer Signature** |  |

Details of Nomination Fee Rs 5/- by cash /DD No.

Enclosures:

1. Copy of Letter of Registration of Article ship duly certified by the principal for Candidate, proposer and seconder.

2. NOC from Principal. **3.** Recent Passport Size photograph of the Candidate

Declaration: I hereby declare that the facts stated above are true and correct to the best of my knowledge and that I agree to abide by the rules and regulations prescribed for Election of Ahmedabad Branch of WICASA as prescribed in Appendix V of Chartered Accountants Regulations, 1988.

Date:

Place: Signature of Candidate

**PRINCIPAL’S NO OBJECTION CERTIFICATE (NOC)**

The Chairperson

Ahmedabad Branch of WICASA

ICAI Bhawan, Opp. Aaryan Euphoria,

Chanakyapuri Road, Ghatlodia, Ahmedabad-380061

Dear Sir / Madam,

I, CA. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,hereby confirm that Ms./Mr.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is serving as an Article Student under me.

I am aware about His/her contesting for WICASA Managing Committee Elections Scheduled on 6th April, 2025 and I have no objection to his/her active participation in activities of Ahmedabad WICASA during the year 2025-26.

Thanking You,

Yours Faithfully,

Signature of the Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Principal M.No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place :

Date :

**ELIGIBILITY FORM**

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The Chairperson

Ahmedabad Branch of WICASA

ICAI Bhawan, Opp. Aaryan Euphoria,

Chanakyapuri Road, Ghatlodia, Ahmedabad-380061

Dear Sir / Madam,

I,Ms./Mr.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby inform you that I am serving as an

Articled/ Audit Clerk under Mr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of M/s.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Chartered Accountants. My articled/ audit service registration

number as per Institute Register is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and my service has commenced from

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am therefore entitled to

cast my vote for electing the members of the Managing Committee of WICASA.

Place:

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Student

Countersigned by

Signature of the Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Principal M.No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place :

Date :