



नेपाल चार्टर्ड एकाउण्टेण्ट्स संघ

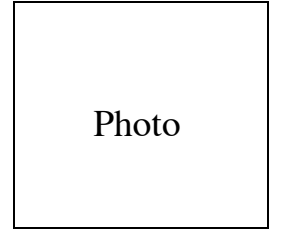
THE ASSOCIATION OF CHARTERED ACCOUNTANTS OF NEPAL

Post Box No. 25444, Babarmahal, Kathmandu, Tel: 5353068, E-mail: acan@ntc.np

Date: .....

Application for Membership

To,  
The President,  
The Association of Chartered Accountants of Nepal,  
Babarmahal, Kathmandu, Nepal



I have passed the Chartered Accountancy Examination from.....  
..... in ..... and am applying for  
membership. The details of the examinations that I have passed are stated and enclosed  
herewith in this form. I agree to abide by the decision of the Executive Committee in this  
regard.

1. **Name in English:** .....

2. **Name in Devanagari:** .....

3. **Date of Birth:** .....

4. **Citizenship No:** .....

5.a. **Permanent Address:** .....

5.b. **Contact Address:** .....

6. Email Address: .....

7. Contact No.: .....

**8. Details of Professional/Highest Academic Qualification:**

Qualification	Year of Passing	Name of the University/Institute

**9. Training Detail:**

- a. Firm's Name and Address: .....
- b. Principal: .....
- c. Training Period: .....

**\*Required Documents:**

- a. Citizenship Certificate &
  - b. Marksheet of Final
  - c. Article completion Certificate
- OR**
- b. Membership Certificate

**\*Documents must be attested by an ACAN member.**

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**Applicant's Signature**