

STUDENT REGISTRATION FORM

Passport Size
 Photograph

(Cross Signed)

For Office Use Only
Registration Form No: _____
Year of Registration: 20__ - 20__

1. PERSONAL DETAILS

First Name		Middle Name		Last Name	
Father / Guardian Name				Contact Number	
Correspondence Address					
Nearest Landmark		City		State	Pin
Tel. (Office)			Res.		
Permanent Address		Same as above			
Nearest Landmark		City		State	Pin
Tel. (Office)			Res.		
Fax			Mobile		
Email ID					
Date of Birth (DD/MM/YYYY)		Gender		Citizen	
		<input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Indian <input type="checkbox"/> Foreign	
Valid ID No. (Pan Card, Voter ID Card, Passport, Adhaar Card, Driving License & Any other Valid ID Proof)				Place of Issue	

2. ACADEMIC RECORD

Examination Level	Qualification	Board / University Institute	Medium of Instruction	Marks (%)	CGPA Attained	Year of Passing
High Secondary						
Bachelor's Degree						
Others						

3. EMPLOYMENT DETAILS

Nature of Employment (Eg. Salaried, Self Employed)
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A. CURRENT/LAST EMPLOYMENT DETAILS

Name of Organization
Turnover of the Organization (APPX)
Type of Industry
Number of Employees working in the Organization
Period of Work (Current)
From: To:
Department
Designation Held
Number of People Directly Reporting to You
You report to (Designation)
Specific Functional Area of Work
Roles and Responsibilities in the Occupation

B. PREVIOUS EMPLOYMENT DETAILS

Name of Organization	
Turnover of the Organization (APPX)	
Type of Industry	
Number of Employees working in the Organization	
Period of Work (Previous)	
From:	To:
Department	
Designation Held	
Number of People Directly Reporting to You	
You report to (Designation)	
Specific Functional Area of Work	
Roles and Responsibilities in the Occupation	

C. ORGANIZATION STRUCTURE AND REPORTING RELATIONSHIPS (UPWARD, DOWNWARD, AND DOTTED LINE) FOR CANDIDATE'S CURRENT POSITION, UPTO TWO LEVELS ABOVE AND UPTO TWO LEVELS BELOW.

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4. NAME OF THE EDUCATION PROVIDER (IF ANY):

Address			
Mode of Registration		Mode of Learning	
<input type="checkbox"/> Regular Pathway	<input type="checkbox"/> Corporate Pathway	<input type="checkbox"/> Classroom	<input type="checkbox"/> Self Study

5. FEE STRUCTURE

Particular		Amount (INR)
1.	Regular & Corporate Fee (Inclusive of Paper Books & Online Courseware Fee)	23,600/- (20,000 + 18% GST)

6. DECLARATION

I wish to register for the CPM® Certification Program. I shall submit the following documents to the Education Provider along with the registration form failing which I Agree that my application for Student Registration will not be considered by AAFM India Pvt. Ltd.:

1. Duly filled Student Registration Form
2. Passport size photo
3. Education Passing Certificate (Duly Attested)
4. Demand Draft of Rs. 23,600/- towards Registration & Courseware fee or Demand Draft of Rs. 23,600/- towards Registration & Paperback Books & Online Courseware fee (in favor of "AMERICAN ACADEMY OF FINANCIAL MANAGEMENT INDIAPRIVATE LIMITED" only payable at New Delhi)
5. Valid ID Proof

I hereby declare that the above information provided by me is true and correct to the best of my knowledge, information and belief. I also agree to adhere to AAFM India Pvt. Ltd. guidelines and instructions. By this registration, I do hereby release AAFM India Pvt. Ltd. from all my claims whatsoever, present or future, which may be caused due to any act or omission by the Authorized Education Provider or otherwise. In case of any dispute which may arise between me and the education provider or AAFM India Pvt. Ltd., the same should be referred to Head – Operations (AAFM India Pvt. Ltd.) and the decision taken by the Head – Operations (AAFM India Pvt. Ltd.) shall be final and binding without any further claim.

- I am aware of the total fees to be paid for the program i.e. Registration Fee, Courseware Fee, Examination Fee and Certification Fee.
- I have read the Terms of Use Policy, Privacy Policy, Education Delivery Model, Rules and Regulations and Disclaimer of AAFM India and agree to abide by them.
- I am aware that fee once paid is non-refundable under any circumstances and the fee paid is non-transferable.
- I certify that the above information provided by me is true and correct to the best of my knowledge, information and belief.

Date : _____ Place : _____ Signature of the Candidate: _____

For Official Use Only (AAFM India Pvt. Ltd.)	
Approved By	
Signature	
Date	
Remarks	

CHECK LIST:- (Before sending your registration form please check (✓) the following documents are enclosed with the form)	
Valid ID Proof (PAN CARD, VOTER ID CARD, PASSPORT, AADHAR CARD or any other valid ID Card)	<input type="checkbox"/>
Duly Self Attested Copies of Mark Sheets: (HSC, Graduation, Post-Graduation, Additional Qualification, Exp. Certificate*)	<input type="checkbox"/>
2 Passport Size Photographs in Addition to the photo pasted on the registration form, Photo ID Proof	<input type="checkbox"/>
Current Profile (Updated Resume)	<input type="checkbox"/>

*Applicable to Experience Pathway Only