



STUDENT REGISTRATION FORM

Registration Form No. : (For Office Use Only)

Year of Registration :

Passport Size Photograph

(Cross Signed)

1. PERSONAL DETAILS

Name :	First Nam	e	Middle Name		Last N	lame
Father / Guardian Na	ame :	Name			Contact I	Number
Correspondence Add	dress:		Als			
Nearest Landmark :	:		ARIO"	City:		
State :	:	10/		Pin:		
Tel. (Office)	: STD Co	ode	Number	Res.:	STD Code	Number
Permanent Address :	KCB					
Nearest Landmark :				City:		
State	:			Pin:		
Tel. (Office)	: STD Co	ode	Number	Res.:	STD Code	Number
Fax :	: STD C	ode	Number	Mob.:		Number





Email ID :

Date of Birth : Citizen: Indian Foreign

DD/(MM/(YYYY

Gender : Male Female

Valid ID Proof No. : Place of Issue:

(Pan Card, Voter ID Card, Passport, Adhaar Card, Driving License & Any other Valid ID Proof)

2. ACADEMIC RECORD

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

o	ENADI	OVI	TIME	DETAIL	C

Nature of Employment: (Eg. Salaried, Self Employed)





A. Cu	rrent/Last Employment Details	
1.	Name of Organization	
2.	Turnover of the Organization (APPX)	
3.	Number of Employees working in the Organization	
4.	Type of Industry	
5.	Period of Work (Current)	From
6.	Department	
7.	Designation Held	
8.	Number of People Directly Reporting to You	
9.	You report to (Designation)	
10.	Specific Functional Area of Work	
11	Roles and Responsibilities in the Occupation	
B. Pr	evious Employment Details	
1.	Name of Organization	
2.	Turnover of the Organization (APPX)	

Organization

Type of Industry

3.

4.

Number of Employees working in the





B. Pre	evious Employment Details		
5.	Period of Work (Previous)	From	То
6.	Department		
7.	Designation Held		
8.	Number of People Directly Reporting to You		
9.	You report to (Designation)		
10.	Specific Functional Area of Work		
11	Roles and Responsibilities in the Occupation	MCIAIL	
	rganization structure and reporting relationships arrent position, upto two levels above and upto two		dotted line) for candidate's
	CHOEMY		

4. Name of the Education Provider:

Address:

Mode of Registration : Regular Pathway Corporate Pathway

Mode of Learning : Classroom Self-Study Online / Webinar





Signature of the Candidate

5. 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)

Place:

4. Valid ID Proof

Date:

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.

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

CHECK LIST :— (Before sending your registration form please check ($\sqrt{\ }$) 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
Duly Self-Attested Copies of Mark Sheets: (HSC, Graduation, Post-Graduation, Additional Qualification, Exp. Certificate*)
2 Passport Size Photographs in Addition to the photo pasted on the registration form, Photo ID Proof
Current Profile (Updated Resume)

^{*}Applicable to Experience Pathway Only