



Please paste photograph (3.0cm x 2.5cm)

Photograph exceeding this size will not be accepted

# CERTIFIED HOSPITALITY FINANCE & MANAGEMENT ACCOUNTANTS PROFESSIONAL QUALIFICATION(CHFMA)

## APPLICATION FOR STUDENT REGISTRATION

(Please read carefully and understand properly the instructions given in page iii before completion of this application )

### PERSONAL DATA

For Office Use Only

1. Full Name :

.....  
 .....  
 ( Strictly in accordance with the Birth Certificate)

Application No.		
Date Received		
Registration No.		

1.1 Name with initials :

Name

Initials

Title: 

Mr.	Miss.	Mrs.
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 .....

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(“Name” which is the last part of the full name should be written along the dotted line, and “Initials” which denote the other parts of the full name, given under No.1 above, should be written in the cages meant for initials )

2. Marital Status : .....

3. Date of Birth: 

Year	Month	Date
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4. NIC NO. 

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### CONTACT DETAILS

Address	5. Permanent Address		District	
	6. Mailing Address		Province	
7. E-mail :				
		Home	Office	
8. Telephone :			Mobile:	

### EDUCATION (The Category under which Registration is Sought)

Please select only one cage and mark “x”

<b>Foundation Program</b>	9.1 G.C.E. (O/L) with 2 year’s working experience in Hospitality industry	
	9.2 Two Passes in G.C.E. A/L	
<b>Certificate Program</b>	9.3 Part Qualification of CMA/CA/ACCA/CIMA with 1year working experience in Finance field in Hospitality Industry	
	9.4 AAT with 2 year’s working experience in Finance field in Hospitality Industry	
<b>Diploma Level</b>	9.5 Full Qualification of CMA/CA/ACCA/CIMA with 1year working experience in Finance field in Hospitality Industry	
	9.6 Other	

10.1 Performance at G.C.E. (O/L) Examination

Subject	Grading		Year & Month		Index No.	
	1st Attempt	Subsequent attempt	1st Attempt	Subsequent attempt	1st Attempt	Subsequent attempt
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

10.2 Performance at G.C.E. (A/L) Examination

Subject	Grading		Year & Month		Index No.	
	1st Attempt	Subsequent attempt	1st Attempt	Subsequent attempt	1st Attempt	Subsequent attempt
1.						
2.						
3.						
4.						

10.3 Performance at Professional/ Academic Examinations ( If applicable ):

Name of Qualification			
Stage/Stages Passed			
Year			

11. Details of Employment:(only hospitality industry)

**EMPLOYMENT**

Name of Organization	
Office Address	
Designation / Job Title	
Period of Experience in an accounting field	
Nature of duties in accounting field	

**FEES**

12. Sum of Rs. .... was paid at the ..... branch of People’s Bank and Duplicate copy of slip and the Special Payment Voucher are attached.

**BACKGROUND INFORMATION**

13. School last Attended : .....

13.1. How did you get to know about CMA ?

- Newspaper                       Education Exhibition                       Through Friend/Word of Mouth  
 Through Awareness Programmes Conducted in Schools/Colleges       Banners/Handbills                       Other

13.2 please. specify the name of institute and the Town you wish for attending Classes.

- Colombo                       Kandy                       Galle

.....

**DOCUMENTS**

14. Following Documents are annexed

- 14.1 Certified Photocopies of the Educational/Professional Qualifications under which **registration is sought**.
- 14.2 Certified Photocopy of Birth Certificate.
- 14.3 Two stamp size (3.0cm x 2.5cm) colour photographs one of which is certified on the reverse by the person who attested the application. ( The other photograph is pasted to the application )
- 14.4 The duplicate of the paying-in-slip for the registration fee and the annual subscription fee together with the special payment voucher obtained from the relevant Branch of the People’s Bank upon depositing the money.
- 14.5 Self addressed Stamped Post Card.
- 14.6 Service Letter confirming the period and nature of work of employment in Hospitality Industry.

15. I hereby certify that the information given by me in this application is true and correct. I shall abide by decisions of the Governing Council on all matters affecting discipline and examinations. I agree that the Institute has the right to terminate my student registration at any time.

**DECLARATION**

16. I certify that Mr/Mrs/Miss ..... who is an officer in my office/ a past pupil/ teacher of my school/ Known to me personally placed his/her signature in this, in my presence today

.....  
Signature of Applicant

**ATTESTATION**

Date:

.....  
Signature of Attestor  
Official Stamp

Name of Attestor	
Designation	
Organization/Company/Firm	
Address	

The attestor should be either the employer, member of ICMASL, ICA, CIMA, Attorney-at-law, Government Servant at Officer Level, School Principle/Vice principle/Head Master or Justice of The Peace, whose residential address is different from that of the applicant.

**INSTRUCTIONS**

- (1) This application should be completed in **BLOCK LETTERS, LEGIBLY and NEATLY**.
- (2) Full name should be written strictly **in accordance with the Birth Certificate**. When writing the name with initials "Name" which is the last part of the full name should be written along the dotted line, and initials which denote the other parts of the full name should be written in the cages meant for "Initials"
- (3) If your name is indicated in different ways in different documents submitted, please submit an affidavit properly attested by a JP. However, your name has to be used in your application strictly **in accordance with the Birth Certificate**.
- (4) A married female student using her name together with a part of her husband's name should submit a certified photocopy of her Marriage Certificate.
- (5) Photocopies submitted should be certified by the attestor under his/her official stamp which indicates his/her name and other relevant particulars.
- (6) When submitting photocopies of Birth Certificate, G.C.E. A/L & G.C.E. O/L Certificates/ Results Sheets, both sides of the documents should be photocopied and certified.
- (7) Photocopies submitted should be neat and clear.