

REGISTERED VALUERS ORGANISATION

(A Wholly owned subsidiary of ICSI and registered with IBBI)

APPLICATION FOR REGISTRATION AS A VALUER MEMBER & EDUCATIONAL COURSE

To
ICSI Registered Valuers Organisation
4th Floor, ICSI House,
22, Institutional Area, Lodi Road
New Delhi -110003

Please paste
self-attested
Passport size
photograph

(scanned copy of application to be send to email-id rvo@icsi.edu)

From

Subject: Application for registration as a Valuer Member & Educational Course

Sir / Madam,

I hereby apply for enrolment as a valuer member and undergo Educational Course with the ICSI Registered Valuers Organisation under section 247 of the Companies Act, 2013 as per the Companies (Registered Valuers and Valuation) Rules, 2017 for the Asset Class viz. "Securities or Financial Assets"

My details are as under:

A. PERSONAL DETAILS

1. Title (Mr/Mrs/Ms):

2. First name :

Middle name:

Last name:

3. Father's Name:

4. Mother's Name:

5. Date of Birth (DD/MM/YY):

6. PAN No.:

7. AADHAAR No.:

8. Hold valid Passport : Yes / No. If Yes: Passport No.:

9. Address for Correspondence (including Pin code):

10. Permanent Address (including Pin code):

11. E-Mail Address:

12. Mobile No.:

B. EDUCATIONAL AND PROFESSIONAL QUALIFICATIONS

1. Educational Qualifications

[Please provide educational qualifications from Bachelor's degree onwards]

Educational Qualification	Year of Passing	Marks (Percentage)	Grade/ Class	University/College	Remarks, if any

2. Professional Qualifications [excluding valuation specific courses]

Professional Qualification [excluding valuation specific education/courses]	Institute/ Professional Body	Associate / Fellow	Membership No. (if applicable)	Certificate of Practice No. (if applicable)	Marks (Percentage)	Date of Passing

C. WORK EXPERIENCE

1. Are you presently in practice / employment? (Yes or No)
2. Name of profession and number of years in practice or of work experience in the relevant profession or in valuation (in years and months):
3. If in practice, address for professional correspondence:
4. Number of years in employment (in years and months):

5. Experience Details

Sl. No.	From Date	To Date	Employment / Practice	If employed, Name of Employer and Designation	If in practice, experience in the relevant profession/ valuation	Area of work

D. ADDITIONAL INFORMATION

1. Have you ever been convicted for an offence? Yes or No. If yes, please give details.
2. Are any criminal proceedings pending against you? (Yes or No) If yes, please give details.
3. Have you ever been declared as an undischarged bankrupt, or applied to be adjudged as Bankrupt? (Yes or No) If yes, please give details.
4. Please provide any additional information that may be relevant for your application.

E. ATTACHMENTS

1. Self attested copies of proof of residence, Identity Proof (PAN/Driving Licence/Aadhar/Voter Id etc.)
2. Self attested copies of documents in support of educational qualifications professional qualifications
3. Self attested copies of documents demonstrating practice or work experience for the relevant period.
4. Self attested copies of certificate of employment by the relevant employer(s),

specifying the period of such employment.

5. Self attested copies of Income Tax Returns for the last three years.
6. Proof of payment of fees

F. AFFIRMATION

1. The copies of documents, as listed in section E of this application form have been attached/ uploaded. The documents attached/ uploaded are

I undertake to furnish any additional information as and when called for.

2. I am not disqualified from being registered as a valuer under the Companies (Registered Valuers and Valuation) Rules, 2017.

3. This application and the information furnished by me along with this application is true and complete. If found false or misleading at any stage, my registration shall be summarily cancelled.

4. I hereby undertake to comply with the requirements of the Companies Act, 2013, the rules made thereunder, the directions given by the authority, and the bye-laws, directions and guidelines issued or the resolutions passed in accordance with the bye-laws by ICSI Registered Valuers Organisation.

5. The applicable fee has been paid. (Demand draft no.....& Date.....)

Place:

Name and Signature of applicant

Date:

FOR OFFICE USE ONLY

Date of receipt of application: Receipt number

Enrolment Number generated..... (i.e membership number)