

## Application for Empanelment for Forensic Accounting & Fraud Investigation

<b>Name of the person applying for empanelment</b>	
<b><u>Contact Details</u></b> <b>Address for Correspondence &amp; Professional Address – Place of Business</b>	
<b>Whether the applicant is a partner in any firm?</b> (Please note that the assignment can be carried out only by an individual although he / she is a partner in a firm and the work can not be delegated to any other person including other partner)	
<b>Whether registered with The Institute of Chartered Accountants of India, New Delhi</b>	
<b>If Yes, the member's registration number and also firm registration number, if any</b>	
<b>Date of registration with ICAI – Applicant</b>	
<b>Total years of holding certificate of practice</b>	
<b>Please provide service tax registration number</b> (in case of partner of any firm, please provide the registration number of firm)	
<b>Whether the applicant or his/her partners were any time subjected to Disciplinary Action by ICAI</b> {If a complaint is pending, please furnish details of such complaint(s)}	

<p><b>Does the applicant has acquired / hold / in the process to acquire any other professional qualification other than Chartered Accountant Degree? If yes, please furnish the details (Please attach details in a separate paper if necessary)</b></p>	
<p><b>Does the applicant possess any qualifications related to Systems Audit / Audit or design of systems under computerized environment? If yes, please furnish the details (Please attach details in a separate paper if necessary)</b></p>	
<p><b>Does the applicant possess any qualifications / certificate of qualification related to Forensic Accounting / Fraud Investigation? If yes, please furnish the details (Please attach details in a separate paper if necessary)</b></p>	
<p><b>Does the applicant has any previous experience in conduct of investigation related to fraud / white color offence? (if yes, please attach documentary evidence)</b></p>	

- I understand that although the assignment is given to me in my individual capacity, the fee / professional charges will / shall be payable to the firm in which I am a partner i.e. M/s \_\_\_\_\_, payable at \_\_\_\_\_.
- I also understand that the assignment can not be / shall not be delegated to any other person including my partners and also understand that the information acquired in the process of conduct of this assignment should not be discussed with any person except the investigation team.
- I here by confirm that the information furnished is true and correct.
- I understand that if the information submitted above, if found to be wrong, I shall be punishable under the law as may be in force.

Name in bold letters

Signature of Applicant \_\_\_\_\_

Membership Number with ICAI \_\_\_\_\_

