



# THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA

[Set up by an Act of Parliament]

## Special Examination for Members of Foreign Accounting Bodies with whom the ICAI had entered into Mutual Recognition Agreement (MRA) / Memorandum of Understanding (MoU)

Last Date: **22<sup>nd</sup> February 2024**

### NOTE FOR INFORMATION AND GUIDANCE OF APPLICANTS

*Candidates are advised to carefully read, understand and follow the instructions while filling in the Form and retain a copy of the same for future reference. Candidates are also requested to go through the Announcement relating to Special Examinations for candidates under Mutual Recognition Agreement (MRAs) / Memorandum of Understanding (MoU) with Foreign Accounting bodies.*

|     |                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (1) | Dates of Examination                                                                                                                                                                     | <b>24<sup>th</sup> to 28<sup>th</sup> June 2024</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| (2) | Timings of Examination                                                                                                                                                                   | 2.00 P.M. – 5.00 P.M. (IST)<br>with advance reading time (for question paper) of 15 Minutes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| (3) | Filling up of Admit Card                                                                                                                                                                 | Candidates are required to fill in the relevant columns in the Admit Card and submit the same to the Examinations Department alongwith the examination application form.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| (4) | Examination Centre                                                                                                                                                                       | Noida (Uttar Pradesh) (INDIA)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| (5) | Examination Fees                                                                                                                                                                         | The Examination Fees once paid by a Candidate shall not be refunded / adjusted under any circumstances. Candidate who are applying for the second time and onward are required to remit the Examination Fees again.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| (6) | Last date for receipt of application at the Institute's Headquarters at New Delhi                                                                                                        | <b>22<sup>nd</sup> February 2024</b><br>(Application received after 22 <sup>nd</sup> February 2024 will not be entertained under any circumstances. Therefore, candidates sending their application by post must send the same at least 3-4 days in advance of the last date and avoid sending it on the last date for receipt of application forms).                                                                                                                                                                                                                                                                                                                                                                      |
| (7) | How should the application form reach the Institute?                                                                                                                                     | The application form be sent by <b>Speed Post / Registered Post</b> only in the special envelope attached to the Examination Form to the <b>Director (Exams.), The Institute of Chartered Accountants of India, "ICAI Bhawan", Indraprastha Marg, New Delhi – 110 002.</b> <ul style="list-style-type: none"> <li>• Candidates are advised to retain the receipt issued by Post Office till the receipt of Admit Card.</li> <li>• <b>Candidates are advised not to send the application through private courier.</b></li> <li>• Candidates should not submit/send the application form to regional/branch offices of the Institute.</li> <li>• Incomplete examination application form will not be entertained.</li> </ul> |
| (8) | Admission to the Special Examination for Members of Foreign Accounting Bodies with whom the ICAI had entered into Mutual Recognition Agreement (MRA) / Memorandum of Understanding (MoU) | No candidate shall be admitted to the Special Examination for Members of Foreign Accounting Bodies with whom the ICAI had entered into MRA / MOU unless he/she has been registered with the ICAI and has been issued the registration letter.                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

|     |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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| (9) | Subjects to be cleared by Members of Foreign Accounting Bodies with whom the ICAI had entered into Mutual Recognition Agreement (MRA) / Memorandum of Understanding (MoU) | <p>(a) <b><u>CPA Australia Members</u></b> are required to pass the following subjects:</p> <ul style="list-style-type: none"> <li>(i) Corporate &amp; Allied Laws</li> <li>(ii) Taxation</li> <li>(iii) Advanced Auditing and Professional Ethics*</li> <li>(iv) Financial Reporting**</li> </ul> <p>* Not applicable if they had studied Assurance Services &amp; Auditing (Pre 2010) or Advance Auditing and Assurance (Post 2010) in CPA Program.</p> <p>** Not applicable if they had studied Financial Reporting &amp; Disclosure (Pre 2010) or Financial Reporting (post 2010) in CPA Program.</p> <p>(b) <b><u>CPA – Ireland Members</u></b> are required to pass the following subjects:</p> <ul style="list-style-type: none"> <li>(i) Corporate and Allied Laws</li> <li>(ii) Direct and Indirect Taxes</li> <li>(iii) Strategic Financial Management*</li> <li>(iv) Advanced Auditing &amp; Professional Ethics**</li> </ul> <p>* Not applicable if they had studied Strategic Corporate Finance as an elective in CPA examinations.</p> <p>** Not applicable if they had studied Audit Practice &amp; Assurance Services in CPA examinations.</p> <p>(c) <b><u>CPA - Canadian Members</u></b> are required to pass the following subjects:</p> <ul style="list-style-type: none"> <li>(i) Corporate and Allied Laws</li> <li>(ii) Taxation</li> </ul> <p>(d) <b><u>SAICA Members</u></b> are required to pass the following subjects:</p> <ul style="list-style-type: none"> <li>(i) Company Law</li> <li>(ii) Taxation</li> <li>(ii) Information Systems Control and Audit</li> </ul> <p>(e) <b><u>ICAEW Members</u></b> are required to pass the following subjects:</p> <ul style="list-style-type: none"> <li>(i) Auditing and Assurance</li> <li>(ii) Law, Ethics and Communication</li> <li>(iii) Information Technology and Strategic Management</li> <li>(iv) Direct Tax Laws and</li> <li>(v) Indirect Tax Laws</li> </ul> <p>(f) <b><u>ICAN Members</u></b> are the required to pass following subjects:</p> <ul style="list-style-type: none"> <li>(i) Corporate Laws and Other Economic Laws</li> <li>(ii) Direct Tax Laws and International Taxation</li> <li>(iii) Advanced Indirect Tax Laws</li> </ul> <p>(g) <b><u>MICPA Members</u></b> are required to pass the following subjects:</p> <ul style="list-style-type: none"> <li>(i) Corporate and Allied Laws</li> <li>(ii) Taxation</li> </ul> <p>(h) <b><u>CAANZ Members</u></b> are required to pass the following subjects:</p> <ul style="list-style-type: none"> <li>(i) Indian Law</li> <li>(ii) Taxation</li> <li>(iii) Ethics</li> </ul> |
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**Special Examination for Members of Foreign Accounting Bodies with whom  
the ICAI had entered into Mutual Recognition Agreement (MRA) /  
Memorandum of Understanding (MoU)**

Control No. \_\_\_\_\_ Roll No. \_\_\_\_\_

**LATEST PHOTO  
ONLY**

Candidate should affix  
self-attested photograph  
which should be pasted  
in this space and not  
merely stapled.

## **EXAMINATION APPLICATION FORM**

**THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA**  
Special Examination for Members of Foreign Accounting Bodies with whom the  
ICAI had entered into Mutual Recognition Agreement (MRA) / Memorandum of  
Understanding (MOU) from 24<sup>th</sup> to 28<sup>th</sup> June, 2024  
(Please fill in the form carefully as per instructions enclosed).

|                                                  |                                                                                                                                                                                                           |
|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>I. APPLICATION DETAILS (IN BLOCK LETTERS)</b> |                                                                                                                                                                                                           |
| <b>1.</b>                                        | <b>NAME (MR. / MS.):</b> _____<br>as mentioned in the Registration<br>Letter issued by the ICAI                                                                                                           |
| <b>2.</b>                                        | <b>FATHER'S NAME:</b> _____                                                                                                                                                                               |
| <b>3.</b>                                        | <b>ICAI REGISTRATION NO.</b><br>(ATTACH PHOTOCOPY)                                                                                                                                                        |
| <b>4.</b>                                        | <b>CITY OF YOUR:</b> _____<br><b>PROFESSIONAL ADDRESS</b> _____<br>(for use in Pass Certificate) _____<br>_____                                                                                           |
| <b>5.</b>                                        | <b>CENTRE OPTED</b> _____ <b>City: NOIDA</b>                                                                                                                                                              |
| <b>6.</b>                                        | <b>DETAILS OF EXAMINATION FEES PAID : INR `</b> _____<br><b>DEMAND / BANK DRAFT NO.</b> _____ <b>DATE</b> _____<br><b>ON</b> _____ <b>(BANK) DRAWN IN FAVOUR</b><br><b>OF SECRETARY, ICAI, NEW DELHI.</b> |
| <b>7.</b>                                        | <b>ADDRESS (BLOCK LETTERS):</b> _____<br><b>FOR SENDING ADMIT CARD</b> _____<br><b>STATEMENT OF MARKS, ETC.)</b> _____<br><b>CITY:</b> _____ <b>PIN</b> _____<br><br><b>STATE:</b> _____                  |

|      |                                                                                                                                                            |                 |           |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------|
| 7.   | <b>PHONE NUMBER:</b> <b>STD / ISD CODE:</b> _____ <b>NO.</b> _____                                                                                         |                 |           |
| 8.   | <b>E-MAIL ADDRESS:</b> _____                                                                                                                               |                 |           |
| 9.   | <b>MEMBER OF (PLEASE TICK ✓ IN THE RELEVANT BOX)</b>                                                                                                       |                 |           |
|      | <b>Name of the Institutes</b>                                                                                                                              | <b>Tick Box</b> |           |
|      | <b>The Institute of Certified Public Accountants in Australia (CPA Australia)</b>                                                                          |                 |           |
|      | <b>The Institute of Certified Public Accountants in Ireland (CPA – Ireland)</b>                                                                            |                 |           |
|      | <b>Chartered Professional Accountants of Canada (CPA Canada)</b>                                                                                           |                 |           |
|      | <b>South African Institute of Chartered Accountants (SAICA)</b>                                                                                            |                 |           |
|      | <b>The Institute of Chartered Accountants of England &amp; Wales (ICAEW)</b>                                                                               |                 |           |
|      | <b>The Institute of Chartered Accountants of Nepal (ICAN)</b>                                                                                              |                 |           |
|      | <b>The Malaysian Institute of Certified Professional Accountants (MICPA)</b>                                                                               |                 |           |
|      | <b>Chartered Accountants Australia and New Zealand (CAANZ)</b>                                                                                             |                 |           |
| 9(a) | <b>Membership Number (Foreign Accounting Body)</b><br><b>(Attach self attested photocopy)</b>                                                              |                 |           |
| 10.  | <b>Member of the CPA Australia - Please indicate the following:</b><br><b>(Put tick [✓] mark in the relevant box).</b>                                     | <b>Yes</b>      | <b>No</b> |
|      | i) Have you completed the subject <b>Assurance Services &amp; Auditing</b> (Pre 2010) or <b>Advance Auditing and Assurance</b> (Post 2010) in CPA Program. |                 |           |
|      | ii) Have you completed the subject <b>Financial Reporting &amp; Disclosure</b> (Pre 2010) or Financial Reporting (post 2010) in CPA Program.               |                 |           |
| 11.  | <b>Member of the (CPA – Ireland). - Please indicate the following:</b><br><b>(Put tick [✓] mark in the relevant box).</b>                                  |                 |           |
|      | i) Have you completed the subject <b>Strategic Corporate Finance</b> as an elective in CPA Examinations                                                    |                 |           |
|      | ii) Have you completed the subject <b>Audit Practice &amp; Assurance Services</b> in CPA Examinations.                                                     |                 |           |

I request for permission to present myself for Special Examination for Members of Foreign Accounting Bodies with whom the ICAI had entered into Mutual Recognition Agreement (MRA) / Memorandum of Understanding (MoU) to be conducted by the Institute of Chartered Accountants of India from 24<sup>th</sup> to 28<sup>th</sup> June, 2024. I solemnly affirm that the above facts and information are complete and correct to the best of my knowledge and belief. Further, I solemnly affirm that I am eligible to appear in the ensuing Special Examination to be held from 24<sup>th</sup> to 28<sup>th</sup> June, 2024 at Noida. I also undertake to abide by the rules for the said Special Examinations and the provisions of the Chartered Accountants Regulations, 1988 framed by the Council of the ICAI for the guidance of Candidates.

**Date:** \_\_\_\_\_

**Place:** \_\_\_\_\_

**(Full Signature of Candidate)**

**Name of the Candidate**

**Address Slip**

(Please fill in Name & Address)

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**Address Slip**

(Please fill in Name & Address)

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|  | <b>THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA</b><br><b>(Examinations Department)</b><br><b>ICAI Bhawan, P.B. No. 7112, Indraprastha Marg, New Delhi – 110 002</b> |
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**Special Exams under MRA / MOU - JUNE 2024**

|                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>LATEST PHOTO ONLY</b><br>Candidate should Affix self-attested Photograph which Should be pasted in this space and not merely stapled. | <b>ADMIT CARD (DUPLICATE)</b> <b>Roll No.</b> _____<br><b>(To be filled in by the Candidate in BLOCK LETTERS)</b><br><br>Name of the Candidate _____<br><br>Registration No. (ICAI) _____<br><br>Membership No. (Foreign Accounting Body) _____<br><br>Regn. No. _____<br><br>Centre: City      NOIDA<br><br>Specimen Signature of the Candidate _____<br><br>Venue of the Examination:<br>(To be filled by the office) |
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Director (Exams.)  
The Institute of Chartered Accountants of India

**Examination Centre: The Institute of Chartered Accountants of India**  
**ICAI Bhawan, A-29, Sector 62, Noida – 201309**  
**Uttar Pradesh**

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|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <b>THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA</b><br>(Examinations Department)<br><b>ICAI Bhawan, P.B. No. 7112, Indraprastha Marg, New Delhi – 110 002.</b> |
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**Special Exams under MRA / MOU - JUNE 2024**

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------|
| <b>LATEST<br/>PHOTO ONLY</b><br>Candidate should<br>Affix self attested<br>Photograph which<br>Should be pasted<br>in this space<br>and not<br>merely stapled. | <b>ADMIT CARD</b>                                          | <b>Roll No.</b> _____ |
|                                                                                                                                                                | <b>(To be filled in by the Candidate in BLOCK LETTERS)</b> |                       |
|                                                                                                                                                                | Name of the Candidate _____                                |                       |
|                                                                                                                                                                | Registration No. (ICAI) _____                              |                       |
|                                                                                                                                                                | Membership No. (Foreign Accounting Body) _____             |                       |
|                                                                                                                                                                | Regn. No. _____                                            |                       |
|                                                                                                                                                                | Centre: City      NOIDA                                    |                       |
| Specimen Signature of the Candidate _____                                                                                                                      |                                                            |                       |
| Venue of the Examination:<br>(To be filled by the office)                                                                                                      |                                                            |                       |

Director (Exams.)  
The Institute of Chartered Accountants of India

**Examination Centre: The Institute of Chartered Accountants of India**  
**ICAI Bhawan, A-29, Sector 62, Noida – 201309**  
**Uttar Pradesh**

| <b>Record of Answer Book tendered at the examination centre</b> |                                |                                                                               |
|-----------------------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------|
| <b>Date of Examination</b>                                      | <b>Name of the Invigilator</b> | <b>Signature of the Invigilator in confirmation of receipt of answer book</b> |
| <b>24/06/2024</b>                                               |                                |                                                                               |
| <b>25/06/2024</b>                                               |                                |                                                                               |
| <b>26/06/2024</b>                                               |                                |                                                                               |
| <b>27/06/2024</b>                                               |                                |                                                                               |
| <b>28/06/2024</b>                                               |                                |                                                                               |

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| <b>Record of Answer Book tendered at the examination centre</b> |                                |                                                                               |
|-----------------------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------|
| <b>Date of Examination</b>                                      | <b>Name of the Invigilator</b> | <b>Signature of the Invigilator in confirmation of receipt of answer book</b> |
| <b>24/06/2024</b>                                               |                                |                                                                               |
| <b>25/06/2024</b>                                               |                                |                                                                               |
| <b>26/06/2024</b>                                               |                                |                                                                               |
| <b>27/06/2024</b>                                               |                                |                                                                               |
| <b>28/06/2024</b>                                               |                                |                                                                               |

**SPEED POST/REGISTERED**

|                                                            |                                                                                                                                                                          |
|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <div>Special Exams<br/>under MRA / MOU<br/>JUNE 2024</div> | <div>To,<br/><br/>The Director (Examinations)<br/>The Institute of Chartered Accountants of India<br/>'ICAI Bhawan'<br/>Indraprastha Marg<br/>New Delhi – 110 002.</div> |
| <div>From:<br/>_____<br/>_____<br/>_____<br/>_____</div>   |                                                                                                                                                                          |

**SPEED POST**  
**Admit Card - Special Exams under MRAs / MoU**  
**JUNE 2024**

To,

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ Pin \_\_\_\_\_

State \_\_\_\_\_



**THE DIRECTOR (EXAMINATIONS)**  
The Institute of Chartered Accountants of India  
ICAI Bhawan, Post Box No. 7112,  
Indraprastha Marg, New Delhi – 110 002.

**Statement of Marks**  
**Special Exams for MRA / MOU - JUNE 2024**

**To,**

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**Pin**

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If undelivered please return to:

**THE DIRECTOR (EXAMINATIONS)**

The Institute of Chartered Accountants of India

ICAI Bhawan, Post Box No. 7112,

Indraprastha Marg, New Delhi – 110 002.