



THE INSTITUTE OF COST ACCOUNTANTS OF INDIA

(Statutory body under an Act of Parliament)

Headquarters: CMA Bhawan, 3, Institutional Area Lodhi Road, New Delhi – 110003.

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**CERTIFICATE OF TRAINING IMPARTED BY PRACTICING COST ACCOUNTANT/
FIRM OF COST ACCOUNTANTS/ORGANISATION
(COMPLETION OF AT LEAST 10 MONTHS PRACTICAL TRAINING PERIOD FOR
FILLING UP THE FINAL EXAMINATION FORM)**

FORM T-5A (NEW)

| | | | |
|----|---|--|-----------|
| 1. | Particulars of Student registered as Trainee: | | |
| | Name in full (in Capital Letters): | | |
| | Fathers Name (in Capital Letters): | | |
| | Student's Registration No. | | |
| | Residential Address | | |
| | Telephone No. | Mobile No. | E-mail ID |
| 2. | Name of the PCMA/ Firm of Cost Accountants/ Organization engaging Trainee | | |
| | Membership No. (PCMA/Firm of Cost Accountants) | | |
| | Organization empanelment no. (if any) | | |
| | Address | | |
| | Telephone No. | Mobile No. | E-mail ID |
| 3. | Date of completion of at least 10 months Training | From: _____ (date) To: _____ (date) | |
| 4. | Areas in which Training is imparted | | |
| 5. | Any General Observation on the conduct of the Trainee | | |

Authorized Signatory with name

Designation and Seal

Date:

Signature of the Student

Registration. No.:

Note: Upload the signed copy of this completely filled form online at www.icmai.in

Important Cut – off Dates

| Form T-5A | June Term Examination | December Term |
|--|--|-------------------------|
| Cut-off dates for Certification for completion of at least 10 months Practical Training Period | 28 th / 29 th February | 31 st August |
| Cut-off dates for submission of Practical Training Forms for filling up Final Examination Form | 5 th April | 5 th October |