

(Please fill the form in CAPITAL LETTERS only. Fields marked \* are mandatory)

## Program Details\*

CPE Program Name (NISM Series): \_\_\_\_\_

CPE Code: \_\_\_\_\_

CPE Centre/Location: \_\_\_\_\_ CPE Date: \_\_\_\_\_

## Personal Details\*

Name: \_\_\_\_\_

PAN No.: \_\_\_\_\_

Gender (M/F): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address for Communication: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ PIN Code: \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email id: \_\_\_\_\_

Affix your recent Passport  
size Photograph within  
this Box

## Professional Details

Educational Qualification: \_\_\_\_\_ Occupation: \_\_\_\_\_

Designation: \_\_\_\_\_ Organization: \_\_\_\_\_

## Certification Details (for Holders of a Certificate)

Name of valid Certificate	Certificate Number	Expiry date of Certificate

## ARN Details (if applicable/for Mutual Fund Distributors Program)

ARN Number	ARN Expiry Date

## Payment Details\* (whichever applicable)

DD Number	Amount	Drawee Bank/Branch	DD Date

Electronic Payment Details:

I hereby confirm that I have carefully read the Eligibility Criteria to be satisfied and the supporting documents to be submitted for the issuance of the CPE Certificate by NISM. I am also aware that NISM reserves the right to defer/cancel issuance of my CPE certificate at any point of time in case any discrepancies are found in either the fee paid or documents submitted by me and that I will neither be entitled to claim refund of the registration fee nor will I be entitled to claim a certificate for the CPE Program attended by me.

Date:

Place:

Signature of the Participant

## Kindly enclose the following in sequence:

1. Two Photographs\* (*Mention your Name and PAN No on the backside of the Photographs*)
2. Copy of PAN Card\*
3. Copy of valid Certificate (*if you are a Certificate holder*)
4. Demand Draft / any other mode of payment
5. Letter from the Compliance Officer (*if you belong to the 'Principal' or 'Grandfathered Type II' category*)
6. Copy of ARN Card (*if applicable/for Mutual Fund Distributors CPE*)
7. Any other document as may be specified in NISM Circular

*Documents marked with\* are mandatory for all participants*

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NISM Contact Details:

**National Institute of Securities Markets**

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