

The Institute of Cost and Management Accountants of Bangladesh  
ICMA Bhaban, Nilkhet, Dhaka-1205.

To  
The Executive Director  
ICMA Bangladesh  
ICMA Bhaban  
Nilkhet, Dhaka.

Subject: **Application for Testimonial.**

1. Name of the student : .....  
(In block letter)
2. Father's Name : .....  
(In block letter)
3. Registration Number : .....
4. Mentioning the session give full description of the level presently studying or studied earlier :  
.....
5. Level wise name of the subjects passed :  
Level-I/KL: .....  
Level-II/BL: .....  
Level-III/OL: .....  
Level-IV/ML: .....  
Level-V/SL: .....
6. Name of the Examination last attended : .....

\_\_\_\_\_  
Signature of the student

**For official use**

7. Tk. 100.00 (Taka one hundred) only has been paid as Testimonial fee.  
Money receipt no. .... Date : .....
8. Annual subscription cleared upto ..... and due  
Tk. .... upto .....

\_\_\_\_\_  
Education Officer

\_\_\_\_\_  
Deputy Director (Finance)

This is to certify that, the above student passed on the following subjects. Testimonial may be given to him according to the above information.

Level-I/KL: .....  
Level-II/BL: .....  
Level-III/OL: .....  
Level-IV/ML: .....  
Level-V/SL: .....

\_\_\_\_\_  
Signature of the Examiner  
Examination Department

\_\_\_\_\_  
Head of the Department  
Examination Department

\_\_\_\_\_  
Head of the Department  
Education Department

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Level-IV/PL-III:.....  
Level-V/PL-IV:.....
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