



THE INSTITUTE OF CHARTERED ACCOUNTANTS OF NIGERIA ICAN TUITION HOUSE SUPPORT FUND

APPLICATION FORM FOR LOAN

| 1. | Name of Tuition House: |
|-----|---------------------------------------------------------------------|
| 2. | Full Address of Tuition House: |
| | |
| | |
| 3. | Year of initial Recognition by ICAN: |
| 4. | District Society of: |
| | a. Chairman: |
| | b. Financial Director: |
| 5. | Membership No of: |
| | a. Chairman: |
| | b. Financial Director: |
| 6. | Purpose of Loan: |
| | |
| 7. | Proposed repayment period and cash flow statements: |
| 8. | Amount of soft loan requested: |
| 9. | Audited Account/Financial Statements (attach) |
| 10. | Resolution of the Director of the tuition house regarding the loan: |
| | |

| | 11. | Personal guarantee from (attach): |
|-------------------------|--------|------------------------------------------------------------------|
| | | Chairman: |
| | | Financial Director: |
| | 12. | CAC certificate of registration (attach copy) |
| | 13. | No of Candidates presented for ICAN exams in the last two diets: |
| | | Professional: |
| | | ATSWA: |
| | 14. | ICAN Financial membership/subscription status of: |
| | | Chairman: |
| | | Financial Director |
| | 15. | MCPE compliant of: |
| | | Chairman: |
| | | Financial Director: |
| | | |
| | | |
| | | |
| | | |
| CHAIRMAN NAME: | | |
| Signature/Date | | ure/Date |
| | | |
| | | |
| FINANCIAL DIRECTOR NAME | | |
| | Signat | ture/Date: |