

ICAM House, Masauko Chipembere Highway P.O. Box 1, Blantyre, Malawi Tel: (265) 0111 895 216 0111 895 217 0111 895 218 Email: <u>icam@icam.mw</u> Website: <u>www.icam.mw</u>

19 December 2024

Dear student,

RENEWAL OF STUDENTSHIP – CERTIFICATE IN FINANCIAL ACCOUNTING PROGRAMME

This is to remind you that your studentship with the Institute ends on **31 December 2024** and will be renewed on payment of the annual subscription fee of **K18**, **000.00** which falls due on **1 January 2025**. Failure to renew your studentship within the specified period will result into your removal from the students' register.

A student who has been removed from the register for non-payment of the annual subscription fee and wishes to re-register will be required to pay the re-registration fee applicable at the time. The re-registration fee is currently **K33**, **000.00**. Previous examination history will be re-assessed on the date of processing the re-registration.

Please return this letter together with your subscription fee to the above address. The closing date for receiving the annual subscription fee is **31 January 2025**. All payments should be made direct into the Institute's bank account. A cheque that is returned by the bank for whatever reason will attract a cash penalty of 50% on redemption. Payment will only be recognized as annual subscription fees upon ICAM receiving your annual subscription form and a copy of a stamped bank deposit slip. The account details are as follows:

- (a) Account Name: ICAM Special, Account Number: 632481, National Bank of Malawi, Victoria Avenue Service Centre.
- (b) ICAM, Account Number 0970362417, First Capital Bank (FCB), Blantyre Branch.

We look forward to receiving your subscription fee.

Yours faithfully,

CHRISSIE JERE (MRS) For: CHIEF EXECUTIVE OFFICER

To be completed by the student

| К | . Cash deposit / Bank transfer / Cheque No: |
|---------------|---|
| Student Name: | Registration No.: |
| Address: | Phone No |

FOR OFFICIAL USE ONLY

| RECEIPT NO.: | DATE: |
|---|---|
| ENTERED BY: | VERIFIED BY |
| NB: Permanent change of address should be | communicated to the Institute in writing. |



A member of:



