



**THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA**  
(SETUP BY AN ACT OF PARLIAMENT)

:

**Applicant Details**

Application  
Status  
Approved

Remarks  
OK

**Personal Detail**

**Registration Number**  
SRO0698380  
**Date of Birth** 05/06/1997  
  
**Region** SOUTH

**Applicant No** CON202473175  
**Gender** FEMALE  
**Nationality** INDIAN  
**Father's Name** VASANTH G N  
**Student Name** VIJAYALAKSHMI V

**Correspondance Address**

**Address Line 1**  
34

**Address Line 2**  
1ST MAIN 5TH CROSS A  
BLOCK

**Address Line 3**  
DEVARAJ URS LAYOUT

**Address Line 4**  
BEHIND NEW COURT  
ROAD

**Country**  
INDIA

**State**  
KARNATAKA

**City**  
DAVANGERE

**Pincode**  
577006

**Permanent Address**

**Address Line 1**

DOOR NO 34

**Address Line 2**

5TH CROSS

**Address Line 3**A BLOCK DEVARAJ URS  
LAYOUT**Address Line 4**

BEHIND COURT ROAD

**Country**

INDIA

**State**

KARNATAKA

**City**

DAVANGERE

**Pincode**

577006

**Mobile Number**

7019056450

**Email Id**VIJAYALAKSHMIVG567  
@GMAIL.COM**Medium of study(study  
material required in)**

ENGLISH

**APPLICATION FOR CONVERSION FROM**

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**Old Course**

NEWINT

**New Course**

CONINT23

**Intermediate Type**

Direct

**PE2/PCC/DIRECT ENTRY(IIPCC)/IPCC TO INTERMEDIATE**

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**Date of Registration in  
Previous Course**

14/Feb/2019

**Qualification Details**

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**Graduation Details 1**

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**Degree Name****Board/Authority/University**

DAVANGERE UNIVERSITY

**Year of Passing**

2018

**Marks Obtained**

3392

**Max Marks**

4200

## Information Technology Training (ITT) and Orientation Programme Details

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### ITT Details

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**Course Name**

ITT

**Certificate Date**

10/Apr/2019

**Certificate Number**

BANGALORE/IT/0004315

**Name of the Regional/Branch Office  
where student has registered for IT  
Training**

BANGALORE BRANCH OF SIRC

**Course Name**

OP

**Certificate Date**

10/04/2019

**Certificate Number**

BANGALORE/IT/0004315

**Name of the Regional/Branch Office  
where student has registered for IT  
Training**

BANGALORE BRANCH OF SIRC

### ARTICLED/AUDIT TRAINING DETAILS

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**DATE OF COMMENCEMENT OF  
ARTICLED/AUDIT TRAINING**

21/Mar/2022

**Employer Name****Employer membership Number**

225681

**DATE OF  
COMPLETION/TERMINATION OF  
ARTICLED/AUDIT TRAINING**

18/Feb/2023

### Uploaded Documents

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**Photo****Signature****Previous Course Marksheet**

[Click here to View.](#)

Payment Details

Payment Mode	Payment Status	Payment Transaction No.	Payment Date
online			12/Jan/2024

Fee Submission Details

Fee Description	Fee Amount	GST (as applicable)
Conversion Fee for intermediate	₹0.0	
Total	₹0.0	