



C I R C U L A R

PERFORMANCE EVALUATION OF EXAMINEES – MEMBERSHIP PATHWAY EXAM (MPE) [PREVIEW OF ATTEMPTED/ ASSESSED DESCRIPTIVE QUESTIONS]

In order to further facilitate the examinees of **Membership Pathway Exam (MPE)**, who are **Fellow Members (FCCAs)** of ACCA, ICMA Pakistan has decided to give them access to preview their **Attempted/ Assessed Descriptive Questions** as well as to get their Assessed Examination Descriptive Questions' Solutions/ Answers re-evaluated, if deemed appropriate/ contending, w.e.f. December 2020 Examinations. The policy has allowed the examinees of MPE to preview their Attempted/ Assessed Descriptive Questions only.

The modalities for applying for Performance Evaluation are as under:

GENERAL GUIDELINES:

- 1- The applications for Preview of Attempted/ Assessed Descriptive Questions of MPE will be entertained only after the official declaration/ notification of examination results after paying the prescribed preview fee of Rs.3,000/- [non-refundable].
- 2- The facility for preview [in the form of scanned screen shots/ soft-format and under the supervision of Examination Department] will be arranged either through Zoom Meeting Facility [if so required] or within the premises of the Institute [at any of the designated exam centre], which will be intimated by the Examination Department, along with 'day/ date' and 'time' within 15 days of the receipt of application for the same.
- 3- The examinee, where **CONTENDED**, after completion of preview session, will be required to submit an amount of Rs.3,000/- [non-refundable] in addition to earlier fee as re-assessment/ re-evaluation fee within next 03 working days of the communicated preview schedule.
- 4- In case of any contend, requested Descriptive Questions will be re-assessed/ re-checked by an independent examiner. Whereas, the feedback on re-assessment will be communicated to the contenders accordingly.

POLICY AND PROTOCOL:

- (1) The protocols of examination hall will be applicable and observed during the preview process.
- (2) The Institute's suggested answers/ solutions along with marking scheme will not be contended.
- (3) The original Descriptive Questions' Solutions/ Answers will not be shown or provided to the applicant as these are Institute's property.
- (4) The previewed paper or any of its contents, in the form of softcopy/ images/ wireless or any other medium of transmission, will not be provided to the contender.
- (5) If the contended solution(s)/ answer(s) is/ are found appropriate (affecting examinee's result status from 'Fail' to 'Pass'), the examinee will be issued a revised examination result for the requested session/ attempt, subject to the approval by competent authority(ies) in forthcoming examination results only, either side in declared result.
- (6) The decision of the Institute shall be considered final. No appeal will be entertained against the decision.

COST OF THE SERVICE:

Preview Fee: Rs.3,000/- [Non-Refundable]

Re-evaluation Fee: Rs.3,000/- [Non-Refundable]

VENUE FOR THE FACILITY:

Designated ICMA Pakistan Centres: Karachi | Lahore | Islamabad | Multan | Faisalabad | Hyderabad | Peshawar



DEADLINE FOR SUBMITTING APPLICATIONS:

The deadline for submitting applications for **Attempted/ Assessed Descriptive Questions of MPE** is 15 days after the official announcement of the result through the Institute's website.

PROCEDURE FOR APPLYING:

- Duly filled in form [Form-A], for Preview of Attempted/ Assessed Descriptive Questions, along with payment voucher, must reach the Examination Department, ICMA Pakistan, Head Office, ST-18/C, Block-6, ICMAP Avenue, Gulshan-e-Iqbal, Karachi, and should also be sent via email at exam@icmap.com.pk **not later than deadline specified**.
- A separate application [Form-B], along with prescribed fee, for re-evaluation, must also reach the Examination Department on above specified addresses **only within next 03 working days of the communicated preview schedule** for the same.
- ICMA Pakistan will not be responsible for any loss(es) incurred as a result of the operations of its preview service.

SENIOR DIRECTOR EXAMINATIONS

Note: Application Forms ['A' & 'B'] can be downloaded from Institute's website.

APPLICATION FOR PREVIEW OF ATTEMPTED/ ASSESSED DESCRIPTIVE QUESTIONS OF MEMBERSHIP PATHWAY EXAM (MPE) 'A'

APPLICANT'S PARTICULARS					PREVIEW/ EXAM CENTRE	
REGISTRATION NO.:	S-					
ROLL NO.:		EXAM CENTRE:	Recent Photograph Not more than six (6) months older			
NAME:	Write Name & Registration No. on the back-side of photograph					
CNIC NO.:						
EXAM TERM:						
MAILING ADDRESS:						
CONTACT NO.: [RES.]			[MOB.]			
EMAIL:	DATE OF REQUEST:					

PREVIEW/ EXAM CENTRE	
Select (✓) your Preview/ Exam Centre:	
	Karachi [Head Office]
	Lahore
	Islamabad
	Multan
	Faisalabad
	Hyderabad
	Peshawar

NOTE: The medium of Preview Session [i.e. either through Zoom Meeting or at the above selected Preview/ Exam Centre] will be informed to the applicant through the contact details provided in this application.

PREVIEW REQUIREMENTS								
PAPER DETAILS					PAYMENT DETAILS [ATTACH EVIDENCE]			
SR. NO.	PAPER TITLE	PROGRAM	RESULT/ MARKS [COPY ATTACHED]	FEE [PAK RUPEES]	MODE OF PAYMENT [PAY ORDER/ DEMAND DRAFT/ VOUCHER]	VOUCHER NO.	PAYMENT DATE	
1.								
TOTAL FEE								

IMPORTANT NOTE
<ul style="list-style-type: none"> ➤ All entries are mandatory to be filled up. ➤ Application containing incorrect information and without photograph will not be accepted. ➤ Application will also not be accepted, if any of the columns found blank. ➤ Duly filled in form [Form-A – for preview purpose] along with payment voucher must reach Examination Department, ICMA Pakistan, Head Office, ST-18/C, Block-6, ICMAP Avenue, Gulshan-e-Iqbal, Karachi, and should also be sent via email at exam@icmap.com.pk, not later than the specified deadline. ➤ ICMA Pakistan is not responsible for any losses incurred as a result of the operations of its preview service.

SERVICE FEE	DECLARATION
<p>Rs.3,000 [Non-Refundable]</p>	<p>I, the applicant, hereby declare that I have understood the requirements of filling this form and that I take full responsibility for any omission or error in filling the form and I also declare that, to the best of my knowledge and belief, the information given in this form is correct and complete in all respects. In the event of being found otherwise I shall abide by the decision of the Institute to summarily reject my application/ withhold my payment. I also undertake and agreed to the modalities [procedure, policy & protocol, etc.] laid down at Circular Ref. # Exam.Policy # PADQ/MPE-21 dated February 17, 2021, now would like to apply for the preview.</p> <div style="border: 1px solid black; width: 100px; height: 30px; margin-left: auto; margin-right: 0; text-align: center;">SIGNATURE</div>

PREVIEW ACTIVITIES [FOR OFFICE USE ONLY]			
SCHEDULING ACTIVITIES			
Preview Required For:	Paper	Program	Marks Secured
Preview Schedule:	Venue/ Exam Centre	Day & Date	Time
PREVIEWING ACTIVITIES			
Identification:	Applicant – <input type="checkbox"/> Matched <input type="checkbox"/> Unmatched		
Agreement: [Only any one of these will be treated valid]	<input type="checkbox"/> 1- I have previewed my Attempted/ Assessed Descriptive Question(s) and hereby declare and agree that the marking scheme is accurately applied to my solution(s)/ answer(s) for all of my attempted question(s)/ sub-part(s) and hence do not appeal for any revision or re-assessment of my Attempted/ Assessed Descriptive Question(s).		Signature with Date
	<input type="checkbox"/> 2- I have previewed my Attempted/ Assessed Descriptive Question(s) and hereby decide to appeal for re-assessment of my produced solution(s)/ answer(s) and revision of my examination result, if applicable, through Form-B and agree to submit the same [Form-B] within the speculated time period of next three working days from the date of my preview session.		
Processed By:	Checked By:	Senior Director Examinations	

APPLICATION FOR RE-ASSESSMENT/ RE-EVALUATION OF ATTEMPTED/ ASSESSED DESCRIPTIVE QUESTIONS OF MEMBERSHIP PATHWAY EXAM (MPE) 'B'**APPLICANT'S PARTICULARS**

REGISTRATION NO.:	S-									MAILING ADDRESS								
ROLL NO.:						EXAM CENTRE:												
NAME:																		
CNIC NO.:						-										-		
EXAM TERM:																		
DATE OF PREVIEW SESSION:						CONTACT NO.: [RES.]												
CENTRE:						[MOB.]												
EMAIL:						DATE OF REQUEST:												

RE-ASSESSMENT/ RE-EVALUATION REQUIREMENTS

PAPER DETAILS				PAYMENT DETAILS [ATTACH EVIDENCE]		
SR. NO.	PAPER TITLE	PROGRAM	FEE [Rs.3,000 Non-Refundable]	MODE OF PAYMENT [PAY ORDER/ DEMAND DRAFT/ VOUCHER]	VOUCHER NO.	PAYMENT DATE
1.						

IMPORTANT NOTE

- All entries are mandatory to be filled up.
- Application containing incorrect information and without photograph will not be accepted.
- Application will also not be accepted, if any of the columns found blank.
- Duly filled in form [Form-B – for re-assessment/ re-evaluation purpose] along with payment voucher must reach **Examination Department, ICMA Pakistan, Head Office, ST-18/C, Block-6, ICMAP Avenue, Gulshan-e-Iqbal, Karachi**, and should also be sent via email at exam@icmap.com.pk, not later than the specified deadline.
- ICMA Pakistan is not responsible for any losses incurred as a result of the operations of its re-assessment/ re-evaluation service.
- Feedback on re-assessment will be communicated to the contenders accordingly.

DECLARATION

I, the applicant, hereby declare that I have understood the requirements of filling this form and that I take full responsibility for any omission or error in filling the form and I also declare that, to the best of my knowledge and belief, the information given in this form is correct and complete in all respects. In the event of being found otherwise I shall abide by the decision of the Institute to summarily reject my application/ withhold my payment. I also undertake and agreed to the modalities [procedure, policy & protocol, etc.] laid down at Circular Ref. # Exam.Policy # PADQ/MPE-21 dated February 17, 2021, now would like to apply for the re-assessment/ re-evaluation of my Attempted/ Assessed Descriptive Question(s) of MPE.

SIGNATURE WITH DATE**SEND THIS FORM TO****EXAMINATION DEPARTMENT****INSTITUTE OF COST AND MANAGEMENT ACCOUNTANTS OF PAKISTAN**

Head Office: ST-18/C, Block-6, ICMAP Avenue,

Gulshan-e-Iqbal,

KARACHI-75300.Phone # 021-99243900 Ext.: 111; Fax: 99243342; Email: exam@icmap.com.pk