

10. Profession of Parent/Guardian

11. Annual income of the ParentGuardian :

12. Home Tel. No. of Parent / Guardian

13. Office Tel. No. of Parent / Guardian

Application for Admission to Full Time Diploma Course

Passport size photo of applicant

	PLEASE FILL UP THE ENTI	RE FORM IN		В	L	р с	K	LE	E   T	·   T	E	R	s	O N	LY
1.	Name of the student (Correct name as per the S.S.L.C mark sheet)		:												
2.	Date of Birth		:	D	D	M	М	Y	/   Y	Y	Υ				
3.	Nationality		:												
4.	Religion		:												
5.	Gender		:												
6.	Whether SC/ST/OBC (if yes enclose copy of the from competent authority Please note BC or MBC co is not valid if you claim C	y. ertificate	:					SC	2	S	ST .	0	BC	(	OC
7.	Mother Tongue	·	:												
8.	Name of Parent / Guardia (Kindly enclose the passp photograph)		Fath Moth												
		G	uardia	an :											
9.	Home Address of Parent/	Guardian		:											
	Passport Photograph of the parent / Guardian	Passport I of the pare	_			State Cour Pin c	ntry		: : :						

				Name	o of the	
	ails of Educational Qual ttested photocopy to b					
		Stude	:nt :			
(	(compaisonly to be given)	Guard	lian :			
16. E-m	ail id Compulsorily to be give	Paren	t :			
			State Country Pin code	:		
15. Offic	ial Address of Parent / G	uardian	:			
			=			

14. Mobile No

SI. No.	Course	Month and Year of Passing	Name of the institution /Board/ University	Place / State
1.	SSLC or its equivalent			
2.	HSC or its equivalent			
3.	Diploma or its equivalent			
4.	Bachelors degree or its equivalent			

18. Main Subject of study in Kalakshetra: (Dance / Vocal / Veena / Violin / Mridangam / Flute / Visual Arts)

19. Do you wish to stay in the hostel? Yes / No

I hereby declare that all the information stated above by me is true to the best of my knowledge and belief, and in case of any wanton suppression or prevarication of facts, I am liable for any penal action that the Kalakshetra administration may deem fit. I also confirm that, I have studied and understood the rules and regulations laid down by Kalakshetra Foundation and I will abide by them at all times.

Signature of Student		Signature of Parent/Guardiar
Date:		

 Home address of Local Guardian (Kindly enclose a photocopy of Identify Proof. i.e. Driving license/Ration card/Passport, etc)

2. Relationship of the Student

(Kindly enclose a Passport size photograph)

4. Mobile Number of Local Guardian +

(Country Code) (Area Code & Telphone No.)

5. E-mail ID of Local Guardian

@

Signature of Parent/Guardian

Signature of Student

## Medical Details of Applicant

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FORM '1B'

Application for Admission

to Full Time Diploma Course



# Applicant's Name

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1.	DIOCO	1 (31()(11)

Cms

- 2. Height (in Cms)
- 3. Weight (in Kgs)

Kgs

- 4. Are you currently suffering from any serious illness or injury? If 'YES', please give details
- YES

NO

5. Are you currently under any treatment or medication? If 'YES', please give details

YES

NO

- 6. Were you previously suffering from any illnesses or injuries? If 'YES', please give details
- YES

NO

7. Were you ever admitted into any hospital?

YES

NO

If 'YES', how many times?
If 'YES', what was the reason for the last admission?

YES

NO

8. Do you have any allergies?

If 'YES', please give details

9. Any other relevant medical details?

Signature of Student

Signature of Medical Officer

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#### Medical Insurance Details

# Application for Admission



FORM '1C'

to Full Time Diploma Course

	App	licant's	Name
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1. Do you have medical insurance? YES NO

(Please tick (✓) the appropriate box)

If 'YES', provide details below and enclose copy of policy

2. Provide medical insurance details below for primary and secondary policies

#### Primary Medical Insurance

Name of the Company :

Policy Number :

Date of Expiry : D D M M Y Y Y Y

Phone Number : 1

(Country Code) (Area Code & Telphone No.)

Secondary Medical Insurance (if any)

Name of the Company :

Name of the Primary Policy holder :

Policy Number :

Date of Expiry : DD MM YYYY

Phone Number : +

(Country Code) (Area Code & Telphone No.)

Signature of Parent

Signature of Student

Not Applicable for Indian Residents

#### Application for Admission



FORM '1D' to Full Time Diploma Course

#### 1. PASSPORT DETAILS

(Kindly enclose a photocopy of the passport)

(a) Passport No.

(b) Passport Date of Issue : D D M M Y Y Y Y

(c) Passport Date of Expiry : D D M M Y Y Y Y

(d) Passport Place of Issue :

#### 2. VISA DETAILS

(Kindly enclose a photocopy of the passport)

(a) Type of Visa :

(i.e. student visa, tourist visa, etc.,)

(b) Visa date of Expiry : D D M M Y Y Y Y

#### 3. SCHOLARSHIP DETAILS (if any...)

Scholarship Name :

Duration of Scholarship Years:

Months:

Phone Number : +

(Country Code) (Area Code & Telphone No.)

E-mail ID :

Contact Address :

State : Country : Pin code :

#### CD/DVD DETAILS

Enclose a CD/DVD (and photographs if available) demonstrating your ability.

Signature of Student

# CHECK LIST FOR ENCLOSURE



- 1. Passport size photograph of the student and of the parent should be enclosed with the application form.
- 2. Proof of date of birth.
- 3. Passport size photograph of the local guardian.
- 4. Identification proof for the local guardian.
- 5. Copy of attested educational qualification certificate.
  - i. Mark sheets.
  - ii. Course completion certificate
- 6. Demand draft for Rs.200/- (Rupees Two Hundred only) should be enclosed by the students along with the application form who has downloaded from website as application fee. (DD should be in the name of "College of Fine Arts" payable at Chennai.)
- 7. Form 1-B, duly signed by a medical officer giving medical details of the student.
- 8. Form 1-C, necessary documents for medical insurance.
- 9. Only for foreign students:
  - a) Copy of the passport.
  - b) Type of Visa.
  - c) CD DVD demonstrating the student's ability.

Foreign students should submit the following details translated in English (if the original is not in English) certified by the authorities of the institution last attended along with the copies of original certificates of other languages

- i. Mark sheets.
- ii. Course completion certificate

Note: Original certificates are to be produced at the time of interview.

#### **Kalakshetra Foundation**

Thiruvanmiyur, Chennai-600041. India. Phone: +91-044-24521169, Fax: +91-44-24524359, Email: registrar@kalakshetra.in