



Application for Film Appreciation Course (05 days) from 10th to 14th Nov 2018

Please fill the form in **BOLD LETTERS ONLY**

1. Name of applicant:
2. Name in Devnagri Script (Hindi):
3. Sex: Male Female 4. Date & Year of Birth:
5. Age as on 01st Nov 2018: 6. Highest academic qualification:
7. Present Profession:
8. Address for correspondence:
.....
..... Pin:
9. Mobile no. Email id:
10. Alternate email id: Alternate mobile no.:
11. No. & date of demand draft enclosed: Amount: **Rs 3,600/-**
12. Drawn on (Bank name & issuing branch):

Paste recent
passport
size
photograph

DECLARATION

The information given in this application is correct to best of my knowledge & belief. I understand that the decision of Director, FTII regarding admission to this Course would be final.

Place:

Date:

Signature of the applicant:.....

This filled application form should reach to:

“The Registrar,
Karnataka Chalanchitra Academy,
Amrutha Mahotsava Bhavna,
20/A, SFHS Layout,
Nadini Layout,
Bangalore – 560 096