## **Application Form**

Program: BA (Hons) in Visual Arts - Ad Film Making (2019-22)

Passport	size
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a.	Name of the Applicant Mr/Ms/Mrs	Surname	First Name			
b.	Applicant's Contact Number					
c.	Father's/Mother/Guardian Name		Contact Number			
d.	Mother's Name		Contact Number			
e.	Date of Birth (DD/MM/YYYY):		_Age:Blood Gr	oup:		
f.	Sex: Male Female		MaritalStatus: Married	unmarried		
g.	Communication Address					
	City:State:	Pincode:	Country:			
h.	Permanent Address					
	City:State:	Pincode:	Country:			
	Nationality:		AadharNo:			
i.	Disability: Yes No Ifyes:					
	Gen ST/SC O	BC Others:				

Specify	University/School/	University/Board Month & Year				Percentage
Examination	College Name	omversity/board	Passing (MM/YYYY)	Obtained	Out of	& Class

						I	
k.	Give two refere	ences with one Local Guardian					
	Reference 1			Reference 2 Name			
	Name			Occupation Address			
	Occupation			Contact No			
	Address						
	Contact No						
l.	Where did you	u hear about us for the first tim	e?				
	SocialMedia	Friends reference	NMIMS Alumni Re	ference Internet	Search	Newsp	aper Ad Other
	(please specify)						
	IDProof(tobep	oresentforNMIMSentrancetest)	): Voter'sID	Aadhar Card	DrivingLic	ense	Passport Other
	(please specify)						

## Payment of Registration Fees

- Pay Registration Fees of Rs. 1,500/- (Non-refundable) by cash or through demand draft in favour of "SVKM's NMIMS" payable at Mumbai.
- Forwardbelowmentioneddocumentsto: To, Admissions Department, SVKM's NMIMS, V.L.MehtaRoad,JVPDScheme, Vile Parle(West),Mumbai-400056.

## List of documents (to be a†ached)

- DemandDraftofRs.1,500/-towards registration/ copy of cash paid receipt towards registration fee paid.
- Copyofdulyfilledregistrationapplicationform
- HSC(Not applicable for appearing candidates) & SSCMarksheet & Certificate copy (Self attested photo copy of passed candidate.)
- Candidateapplication form will not be considered if they fail to submit the above mentioned document till 29<sup>th</sup> June, 2019.

**Declaration:** I have checked all details mentioned in application form. The information furnished by me in this application form is true, to the best of my knowledge and belief. I amaware that if any of the information given by me is found to be incorrect, my admission, if granted to this course is liable to be cancelled and the feespaid by me will be refunded as perrule. I agree to abide by the rules and regulation of the University.

Date		Place			ignature of the Applicant
NOTE: APPLICA	TION FEES ONC	E PAID ARE NO	T REFUNDABLE		
FOR OFFICE US	E ONLY				
ApplicationNo			_	FeeReceipt No	
Eligibility:	Admitted	Rejected			
Entrance Test:	Passed	Failed			
Personal Interview:	Passed	Failed	Comments		
					Signature of the Admissions officer