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Reg No:.....

(For office use only)

Application Form : Session .31st. July . 2017

Applicant's Name:	
Fathers Name:	
Fathers Profession	
Postal Address:	
Postal Address:	
Postal Address:	
City:	
E-mail:	
Date Of Birth:	

PIN- CODE :

CELL:

Courses*

Single Course.

- | | |
|---|--------------------------|
| CR.01: Public Relations, Adverting & Event management | CR.07:Creative writing. |
| CR.02: Film Direction | CR.08:Non Linear editing |
| CR.03: TV Journalism ,anchoring & News Reading | CR.09:Cinematography |
| CR.04: Acting & Modeling | CR.10:Radio Jockey |
| CR.05: Sound Recording & Audio Engineering | CR.11:Wedding Planning |
| CR.06: Fashion Photography & Videography | |

Double Course.

- DCR.01: Editing + Sound Recording and Audio Engineering
 DCR.02: Editing + Cinematography
 DCR.03: Editing + Fashion Photography and Videography
 DCR.04: Editing + Direction
 DCR.05: Direction + Cinematography
 DCR.06: Editing + TVJournalism, News Reading and Anchoring

Educational
Details*

Name of the Course		Course Code	
Level	Board/University	Main Subjects	Name of the School/College
10+2 Completed/ Awaiting			
GRADUATION Completed/Awaiting			
POST GRADUATION			

Payment Details

Name Of the bank	Draft No:	Date

This application form has to be accompanied with the bank draft of Rs. 1000/-(Rupees one thousand)has to be made in the name of " Center for Research In Art of Film and Television" payable at delhi from any bank.

I solemnly undertake that:

I agree to accept the decision of Admission committee regarding my admission after the Interview.

Signature of the Applicant

Date:

Send this Application Form along with bank draft of Rs 1000/- to:

Center for Research in Art of Film and Television.

272, 1st Fl, Car market, sec-7. rohini.Delhi: 110085. India.

Tel: +9899251133/44/55.www.craftfilmschool.com/ www.log2craft.org