



ಚಿತ್ರಕಲಾ ಮಹಾವಿದ್ಯಾಲಯ (ಸಂಜೆ)

COLLEGE OF FINE ARTS (EVENING)

KARNATAKA CHITRAKALA PARISHATH

Affiliated to Bengaluru Central University

Kumara Krupa Road, Bengaluru – 560 001, Phone : 91-80-22261816, Fax : 91-80-22263424

Email : principalbsvae@gmail.com

Name :

Address :

Date of Issue :

Amount :

By P.O/D.D

D.D.No.

No.

M



Photo

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APPLICATION FOR ADMISSION TO

M.V.A.

No.

1. Name of the Applicant (Write in Block Letters) as is in your X/XII Marks Card

2. Gender Male Female : Nationality

3. Name of Father/Guardian/Spouse :

4. Name of Mother :

5. Mother Tongue, Religion & Caste :

6. Date of Birth :

Place :

Age :

7. Postal Address for Correspondence :

Permanent Address:

Local Address:

Tel / Mobile No :
Student

Email :

Tel / Mobile No :
Parents

Email :

Tel / Mobile No :
Parents / Local
Guardian

Email :

Languages known

1.	
2.	
3.	
4.	

8. Parent's Annual Income

9. Claiming for reservation

SC

ST

BC

BT

Rural / Urban

GM

Any other category

Ex Servicemen

Children of Defence

Sports

NCC

10. Education

	Name of the Course	Name of the Board / University	Year of Admission	Year of Passing	Total Marks & Percentage
1.	High School				
2.	P.U.C. Equivalent				
3.	Graduation				
4.	Post Graduation				
5.	Any other				

A. Declaration by the Candidate

1. All the particulars stated in this application are true to the best of my knowledge and belief.
2. 75% attendance is compulsory in each subject.
3. Internal submissions are compulsory failing which the candidate will not be permitted for final submission of Examination of that subject despite having the necessary attendance.
4. Ragging is strictly banned in this campus.
5. Candidate found guilty of drugs & smoking will be dismissed from the college immediately.
6. I hereby declare that I have carefully read the rules of admission and I shall abide by them.

B. Undertaking by Parent / Legal Guardian

1. In the event of the above applicant who is my son/ daughter / being admitted to the Institution, I hereby give an undertaking to pay all his / her fees due regularly to the institution till the completion of his / her course, studies within the prescribed deadline.
2. I also undertake the responsibility for his / her conduct.
3. Is the candidate under medical supervision Yes No
4. If yes - mention phone number to be contacted in case of emergency.
5. Nature of First aid to be administered.

Place:

Date:

Signature of the Applicant

Signature of Parents / Guardian

Enclose Rs. 500 /- DD drawn in favour of "Karnataka Chitrakala Parishath", Bangalore.

Note : Attested Photocopies of

1. Attested Marks Card (SSLC and 2nd PUC Marks Cards)
2. Reservation Certificates in the event of student claiming Reservation should be produced in original at the time of Interview.
3. All the originals should be produced at the time of admission.
4. Seven (7) years study Certificates in Karnataka or Domicile Certificate in case of those claiming "Karnataka Quota".
5. Transfer Certificate and Rural Study Certificate.
6. 4 Nos. Stamp Size Photographs to be submitted at the time of admission

Note : All the Columns to be duly filled up compulsorily

For office use only

Admission No.

On Verification, the application and other records of the candidate are in order Mr.....
Mrs.may be admitted to.....for the academic year.....

Date

Principal



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APPLICATION FOR ADMISSION TO

B.V.A. FOUNDATION

No.

1. Name of the Applicant (Write in Block Letters) as is in your X/XII Marks Card

2. Gender Male Female : Nationality

3. Name of Father/Guardian/Spouse :

4. Name of Mother :

5. Mother Tongue, Religion & Caste :

6. Date of Birth :

Place :

Age :

7. Postal Address for Correspondence :

Permanent Address:

Local Address:

Tel / Mobile No :
Student

Email :

Tel / Mobile No :
Parents

Email :

Tel / Mobile No :
Parents / Local
Guardian

Email :

Languages known

1.	
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8. Parent's Annual Income

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