

MINDSCREEN FILM INSTITUTE (MFi)

4, Ranga Lane, Dr Ranga Rd, Mylapore, Chennai, Tamil Nadu 600004

Mobile: 9841612595 / 9003012595

Email: mindscreen@mindscreen.co.in

**APPLICATION FORM****16 - WEEKEND ACTING COURSE FOR CAMERA**

Name of the Applicant	
Date of Birth	
Blood Group	
Sex	
Mother Tongue	
Marital Status	
Aadhaar Number	

	Name	Occupation	Annual Income	Mobile No.
Father				
Mother				
Guardian				

Are you Working Professional ? NO / YES If Yes, _____

I came to know about this course from: Social Media / Alumni / Google / _____

Permanent Address:	Present Address:

Mobile Number:		Email:	
Whatsapp Number:			

Educational Records:					
Course	Specialization	Name of the Institution	Year of Passed	Grade	Marks (%)

DECLARATION

I hereby declare that will abide by the rules and regulations of the college. All the particulars stated above are true to the best of my knowledge and belief

Signature of the Applicant**Date:****Place:**