

# Admission Form



The Principal  
INTERNATIONAL CENTRE FOR ART & DESIGN  
171-A Khirki Road, Malviya Nagar  
New Delhi - 110017

Photograph  
of  
Applicant

Madam/ Sir

After reading the Prospectus of your Institute I have decided to apply for admission.

I hereby undertake to follow all rules and regulations of the Institute. My particulars are given below:

1. Name(in block letters) Miss/Mrs./Mr. \_\_\_\_\_

2. Father's/Husband's Name \_\_\_\_\_

3. Father's/Husband's Occupation \_\_\_\_\_

4. Permanent Address \_\_\_\_\_  
\_\_\_\_\_

5. Telephone No(if any) \_\_\_\_\_

6. Present Address of Student \_\_\_\_\_  
\_\_\_\_\_

7. Date of Birth \_\_\_\_\_ 8. Single/Married/Widow \_\_\_\_\_

9. Nationality \_\_\_\_\_

10. Qualifications \_\_\_\_\_  
\_\_\_\_\_

Examination Passed	Name of the Board University	Aggregate % of Marks	Subjects Studied	Marks Obtained Subjectwise
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- |  |  |  |    |  |
|--|--|--|----|--|
| 1. Matriculation or 10 + 2                         |  |  | 1. |  |
| 2. Higher Secondary/Senior Cambridge or Equivalent |  |  | 2. |  |
|  |  |  | 3. |  |
|  |  |  | 4. |  |
| 3. Degree Post Graduation                          |  |  | 5. |  |
|  |  |  | 6. |  |
| 4. Other if any                                    |  |  | 7. |  |
|  |  |  | 8. |  |

11. Hobby of the student

12. Course in which admission sought(in order of preferences)

Course	Duration
1.	
2.	
3.	
4.	

13. I hereby certify that I am applying for admission with the consent of my parents/Husband and the information stated above is correct. I understand that fees once paid to ICAD will not be refunded under any circumstances.

Signature of Parent/Husband

Signature of Applicant

Dated \_\_\_\_\_

Dated \_\_\_\_\_

**FOR OFFICE USE ONLY**

Course \_\_\_\_\_

Duration \_\_\_\_\_

Roll No. \_\_\_\_\_