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An Institute of Creative Studies STUDENT ADMISSION FORM

ARTERY ACADEMY OF FINE ART TRUST / REGN NO. : 41711401733

creation beyond imagination

This application should be completed in all aspects and filled in applicant's own handwriting in BLOCK LETTERS.

CHECK YOUR COURSE

- | | | |
|---|--|--|
| <input type="checkbox"/> DRAWING / PAINTING | <input type="checkbox"/> FINE ARTS | <input type="checkbox"/> ADVANCE FINE ARTS |
| <input type="checkbox"/> DIGITAL PAINTING | <input type="checkbox"/> ANIMATION | <input type="checkbox"/> CONCEPTUAL ART |
| <input type="checkbox"/> NIFT/NID/NATA | <input type="checkbox"/> DESIGNING | <input type="checkbox"/> SHORT TERM COURSE |
| <input type="checkbox"/> TEACHER TRAINING PROGRAMME | <input type="checkbox"/> CREATIVE WORKSHOP | |



NAME OF THE STUDENT : _____

PARENTS / GUARDIAN NAME : _____

DATE OF BIRTH : _____ CLASS: _____

SCHOOL : _____

ADDRESS : _____

CONTACT NUMBER : _____

I GRANT APPROVAL FOR MY SON / DAUGHTER TO
TAKE THE FOLLOWING CLASSES AT ARTERY INSTITUTE.

ADHAAR NO. : _____

Thank You !
for your believe and faith on us

Signature of the parents / guardian

ARTERY GROUP

Signature of the student

FOR OFFICE USE :

ADMISSION DATE : _____ ROLL NO. : _____

ADMISSION PROCEDURE :

FOR ADMISSION CANDIDATE HAS TO FILL THIS APPLICATION FORM. THE APPLICATION FORM CAN BE OBTAINED BY CASH PAYMENT OF RS 1500/- AND FREE FOR SCHOLARSHIP STUDENTS.