



Swar Sangam

A Birla Institute for Visual & Performing Arts

BIRLA ACADEMY OF ART & CULTURE (7th Floor)

109, Southern Avenue, Kolkata - 700 029



APPLICATION FORM

Name of Student (Please fill in Block Letter) _____

Name of Parent / Guardian _____

Date of Birth Day _____ Month _____ Year _____

Address for Communication _____

Mobile Numbers _____

Email ID _____

Academic Qualification _____ Year of Passing _____

Name of School / College _____

Course applied for _____

I HAVE READ ALL THE RULES & REGULATIONS OF THE INSTITUTE AND I AGREE TO ABIDE BY THE SAME.

Signature of Applicant

Signature of Parent / Guardian

Date

(for Minor Applicant)

FOR OFFICE USE ONLY

Admission Fee _____ Admitted to _____

Session Fee _____

Tuition Fee _____

Caution Deposit _____ Date of Admission _____

Identity card Fee _____

Prospectus _____

Other _____

Total _____

Office Authority