

# THE INDIAN INSTITUTE OF DIGITAL ART & ANIMATION

An ISO 9001 : 2008 Certified Institute

## Application Form

Before filling out this form read it carefully. Please complete this form in your own handwriting, using block Letters and in black ink.

Application No: IIDAA/2017/

Please affix  
Passport - Size  
Photograph

### 1 Course which you wish to apply

DEGREE COURSES	DIPLOMA COURSES	
<input type="checkbox"/> B.Sc. Animation	<input type="checkbox"/> Diploma 3D Designing & Animation	<input type="checkbox"/> Diploma Photography
<input type="checkbox"/> M.Sc. Animation	<input type="checkbox"/> Diploma Game Development	<input type="checkbox"/> Diploma 2D Animation
<input type="checkbox"/> B.Sc. Film & Photography	<input type="checkbox"/> Diploma VFX & Cinema Effects	<input type="checkbox"/> Diploma Game Designing
<input type="checkbox"/> B.Sc. Game Designing & Development		
Autonomous Course _____		

### 2 Personal Details

Family Name/ Surname									
First/ Given Name									
Father / Guardian / Husband Name									
Sex: (M/F) <input type="checkbox"/>	Blood Group: <input type="checkbox"/>	Date of birth	Nationality <input type="text"/>						
		<table border="1"> <tr> <td>Day</td> <td>Month</td> <td>Year</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>	Day	Month	Year	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Day	Month	Year							
<input type="text"/>	<input type="text"/>	<input type="text"/>							
Correspondence Address									
State	City	Country	Pin-code						
Home Address									
State	City	Country	Pin-code						
Telephone / Guardian's Number									
Mobile									
Email									

### 3 Education Details

#### A - Academic Qualification

\*Please see note on certification

Examination Passed	Name of Institution	Board / University	Year of Passing	Grade / %

#### B - Professional Qualification

\*Please see note on certification

Course Studied	Name of the Institution	Year of Study

### 4 Employment Details [If any]

Most Recent Occupation		Designation
Name of Company / Employer		
Address		
		Pin-code
Country	City	Telephone

### 6 Declaration

I declare that the details that I have outlined in this application are to the best of my knowledge an accurate statement. I also declare I am sufficient to attempt the programme for which I am applying. I agree to the Terms and Conditions and provide my contact information for further communications with me for Service and promotion.

Signature of the applicant ..... Date .....

### 7 For Office Use Only

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\* **Certification** - Application to all programmes should be supported by photocopies of your examination / Diploma Certificates, together with relevant transcripts. All original mark sheets to be produced for registration at the time of admission It is essential that you provide us with information about your English Language skills.