

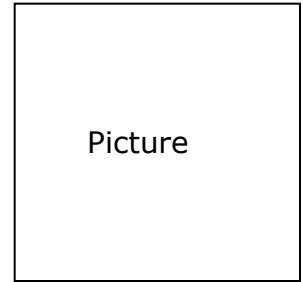
# **SAMVED CONSERVATORY OF INDIAN CLASSICAL MUSIC**

## **-NORTH AMERICA (SCICM)**

Managed by MADHYAM NON-PROFIT CHARITY ORGANIZATION

### **Application form for Bharatanatyam Exam**

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Sir,

I wish to appear for the **Master of Bharatanatyam – Final** examination conducted by SCICM in April / Nov. 20 - -.

Detail information of the candidate:

1. Name : -----  
(First) (Middle) (Last/Surname)

Note: Write your name exactly the way you want it to appear on the Certificate.

2. Mailing Address : -----,  
(Street Name & number) (City) (State – Zip code)

3. Email Address : ----- 4. Phone contact: (Home) -----

5. Phone contact Cell: ----- 6.. Student's DOB : -----  
(Month) (Day) (Year)

Give details of previous exam passed.

Xerox copy of MA Part-1 certificate must be attached with the application.

Details of previous exam passed. Year and exam session : April/Nov -----(year), Roll # -----

Level of Exam passed ----- 6. Teacher/ Guru's Name: -----

7. Teacher/Guru's contact : Email ----- Phone: (-----) -----

**Teacher/Guru's permission:**

**I hereby give my permission to my student/disciple Mr/Ms. -----  
to take this examination. I undertake that I have taught complete curriculum to my student.**

Signature of teacher/Guru -

seal / stamp of the institute

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Undertaking of the candidate:

I hereby agree to follow all the rules and regulations of the institute in this regards.

All the information provided in this form is correct. I have enclosed the form fee by check # -----

Sincerely

Date: -----

-----  
(Signature of the student)

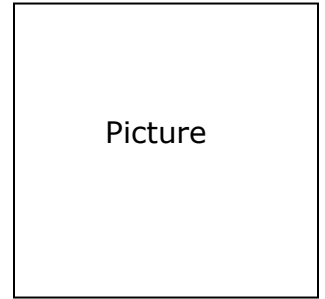
**Make your check Payable to MADHYAM.** (Take print out of this application form, sign it, put your pictures in all three boxes and mail the form to following address: MADHYAM: 17 Mattawang Drive, Somerset, NJ 08873.

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**Application form for Bharatanatyam Exam**

Total two pages of the form - Page - 2



Student's Entry ticket to examination room/hall.

Mr./Ms.(Student's name) : ----- is allowed to take

Exam of **Maste of Bharatanatyam -Final** in April/ Nov. 20 - -

Student's Roll Number : -----

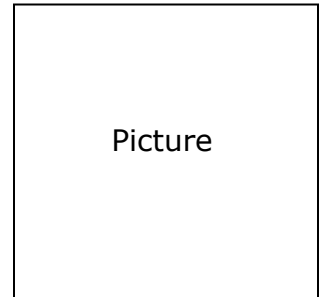
Student's signature : -----  
(student should sign here at the time of filling the form)

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**Application form for Bharatanatyam Exam**

Total two pages of the form - Page - 2



Practical Examiner's Report slip :

Sir,

I hereby certify that I have conducted **Master of Bharatanatyam - Final** Exam

of Mr./Ms. ----- as per the rule. Student's Roll # -----

Location of the practical exam: -----  
(Street # &name ) (City) State - Zip code

Name of Examiner : ----- Date of Exam -----

Signature of Examiner  
(to be taken at the time of Practical exam)

Student's Signature

-----

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(Student will sign on the above line at the time of practical exam)

**Examiner should send all the report slips to the Board along with result sheet.**