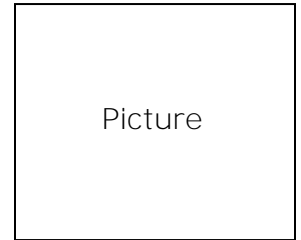


**SAMVED CONSERVATORY OF INDIAN CLASSICAL MUSIC & DANCE**  
**– NORTH AMERICA (SCICMD)**

Managed by MADHYAM NON-PROFIT CHARITY ORGANIZATION

**Application form for Tabla Exam**

Total two pages of the form – Page - 1



Sir,

I wish to appear for the **Prarambhik/Basic Level** examination conducted by SCICMD in April/Nov 20 - -.

Detailed 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)

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

-----

-----

**Undertaking of the candidate:**

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

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

Sincerely

Date: -----

-----  
(Signature of the student)

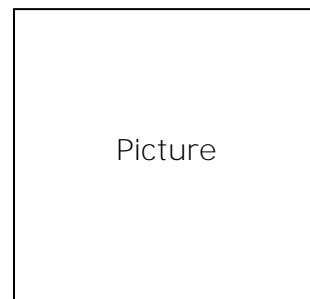
**Make your check payable to MADHYAM.** (Take print out of this application form, sign it, put your pictures in all three boxes and mail the form to following address: MADHYAM: 17 Mattawang Drive, Somerset, NJ 08873.

**SAMVED CONSERVATORY OF INDIAN CLASSICAL MUSIC & DANCE**  
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**Hall ticket for Prarambhik/Basic Level Tabla Exam**

Total two pages of the form – Page - 2



Student's Entry ticket to examination room.

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

**Prarambhik/Basic Level** exam in Tabla subject in April/ Nov. 20 - - exam session.

Student's Roll Number : -----  
(For office use only)

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

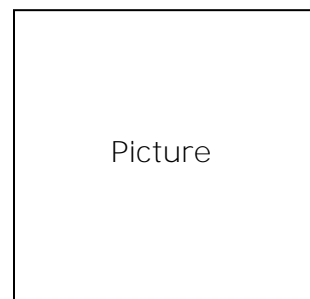
**Cut Here**

**Upper part to be given students and Lower part to be given to the practical examiner by the coordinator.**

**SAMVED CONSERVATORY OF INDIAN CLASSICAL MUSIC & DANCE**  
**– NORTH AMERICA (SCICMD)**

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**Practical Examiner's Report slip-  
Prarambhik/Basic Level:**



Sir,

I hereby certify that I have conducted **Prarambhik/Basic Level** examination in Tabla subject of

Mr/Ms ----- as per the rule. Student's Roll # -----  
(For office use only)

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

Signature of Examiner

Student's Signature

-----

-----

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

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