SAMVED CONSERVATORY OF INDIAN CLASSICAL MUSIC & DANCE

-NORTH AMERICA (SCICMD)

Managed by MADHYAM NON–PROFIT CHARITY ORGANIZATION

Application form for Hindustani Vocal Exam

Total two pages of the form - Page - 1

Picture

Sir,

I wish to appear for the Hindustani Vocal Parichay/ Introductory Level examination conducted by

SCICMD in April / Nov. 20 - -.

Detail information of the candidate:

1.	Name:						
	•	•	· · ·	Viddle) (Last/Surname)			
	Note: Write your name exactly the way you want it to appear on the Certificate.						
2.	Mailing Address:		e & number)				
3.	Email Address :			4. Phone conta	act: (Home)		
5.	Phone contact C	ell:		6 Studer		(Day)	
Details of previous exam passed. Year and exam session : April/Nov(year), Roll #							
Le	evel of Exam pass	ed	6. Teacher/	Guru's Name: -			
7.	. Teacher/Guru's o	contact : Ema	il		Phone: () -		
Teacher/Guru's permission: I hereby give my permission to my student/disciple Mr/Ms							
Się	gnature of teache	r/Guru -		Sea	al / stamp of the ins	stitute	
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 #							
Sir	ncerely			Date:			
	ignature of the stu						

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 Dirve, Somerset, NJ 08873.

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Total two pages of the form - Page - 2

Picture

Picture

Student's Entry ticket to examination room.

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

Hindustani Vocal Parichay/ Introductory Level exam 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 Hear

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

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Total two pages of the form – Page - 2

Practical Examiner's Report slip :

Sir,

I hereby certify that I have conducted Hindustani Vocal Parichay/ Introductory Level Exam

in April/ Nov. 20 session, at (location) center of

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

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.