

FASHION DESIGN

- Degree Course** B.Sc In Fashion Design (Affiliated to YCMOU) *
-
- Diploma Course** Fashion & Textile Design (Affiliated to MSBTE) *
-
- Autonomous Course**
- | | |
|---|---|
| <input type="checkbox"/> Fashion Design - Professional Course | <input type="checkbox"/> Fashion Illustration |
| <input type="checkbox"/> Fashion Design - Advance Course | <input type="checkbox"/> Fashion Styling |
| <input type="checkbox"/> Fashion Design - Foundation Course | <input type="checkbox"/> Fashion Drapes |

To,
The Principal
Aditya College of Design Studies,
Borivali (west).

Respected Madam / Sir,

I, the undersigned, wish to take admission for _____ course in your esteemed college for the academic year 2017-2018. I have read the disciplinary rules & regulations of the college and agree to abide by the same. I hereby give my details as under. The information given is true to the best of my knowledge and I am aware that if it proves false, my admission will be cancelled.

(Signature of Candidate)

Personal Details :

Name of Candidate : Mr./ Ms.

First Name

Middle Name

Surname

Gender : M F

Date of birth : _____ **Nationality :** _____

Residential Address : _____

City : _____ **State:** _____ **Pin:** _____

Tel no : (M) _____ **Landline no. :** _____ **E-mail :** _____

Name of Parent / Guardian : Mr. / Ms.

First Name

Middle Name

Surname

Parent's / Guardian's Address : _____

City : _____ **State:** _____ **Pin :** _____

Tel no : (M) _____ **Landline no. :** _____ **E-mail :** _____

Mother Tongue : _____ **Languages Known :** _____

Details of Qualifying Examination:

(Enclose copies of self attested marklist / certificates)

Name of Examination	Name of Univ./ Board	Name of School / College	Year of Passing	Marks / out of	Class & % of marks
SSC					
HSC					
Other qualification if any					

Indicate whether you have simultaneously applied to any other Degree / Diploma Course. If yes, give details.

DECLARATION BY THE PARENT / GUARDIAN

I, Mr. / Ms. _____
the undersigned have read the policy of Admission, Rules & Regulation of ACDS. I agree to abide by the same. I am also aware that my ward is required to attend minimum 75% of total working days & do submission of assignments regularly to obtain minimum passing marks.

Your's Faithfully,

(Signature of Parent / Guardian)

1) Occupation : Service Profession Bussiness

2) Designation : _____

3) Nature of Profession / Business : _____

4) Office Address : _____

Tel no : (M) _____ Landline no. : _____ E-mail : _____

5) Spouse's Name : _____

Tel no : (M) _____ Landline no. : _____ E-mail : _____

FOR OFFICE USE ONLY

Please admit Mr. / Ms. _____ in the academic year 2017 - 2018.

Form No. : _____

Date : _____

(Principal's Signature)

Mr. / Ms. _____ is being admitted

in the academic year 2017 - 2018 for _____

Drawn on (bank's name) : _____

Payable at : _____

Amount : **Rs.** _____

Amount (in words) : **Rupees** _____

Receipt No. : _____

(Cashier / Accountant's Signature)