



Seamless Education Academy Pvt. Ltd.
Address: 17, Emerald House, Opp ICC Chambers, Senapati Bapat Road, Pune: 411016, Tel: + 91 20 66431900 / 99
www.seamedu.com

APPLICATION FORM

- 1) Form should be filled in by candidate only in clean legible handwriting.
2) Form should be filled in block letters only. Leave one block between each word.
3) Application should be submitted, complete in all aspects along with the application fees of Rs. 5,000/- by Cash or Demand Draft favoring Seamless Education Academy Pvt. Ltd. Payable at Pune.
4) In case the form is downloaded from the website then, the prospectus will be sent after receiving the formand DD at SeamEdu office at the address of the candidate. Incomplete forms shall not be accepted.

SEAMLESS EDUCATION ACADEMY

- SeamEdu's ID Animation & Arts Studio School
SeamEdu's School of Broadcast Media
SeamEdu's Institute of Gem & Jewellery
SeamEdu's School of Radio Jockeying & Voice Over
SeamEdu's School of Sound Engineering

Five empty checkboxes for course selection.

COURSE OFFERED

Large empty rectangular box for course selection.

PERSONAL INFORMATION

Surname : [Grid of 20 boxes]

First Name : [Grid of 20 boxes]

Middle Name : [Grid of 20 boxes]

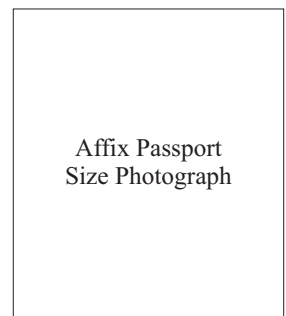
Date of Birth : [Grid of 3 boxes] [Grid of 2 boxes] [Grid of 4 boxes] Age : [Grid of 2 boxes] Yrs.

Sex : Male [] Female [] Marital Status : Married [] Unmarried []

Nationality : [Grid of 10 boxes] Mother tongue : [Grid of 10 boxes]

Mobile No. : [Grid of 10 boxes] Residence No. : [Grid of 10 boxes]

Email: [Grid of 30 boxes]



HOW DID YOU KNOW ABOUT THE INSTITUTE

Through Press advertisement (Newspaper, Magazine)

Word of mouth (Please Specify)

Website

Others (Please Specify)

MODE OF PAYMENT

Cash Demand Draft Credit Card Debit Card

DD No. :

Receipt No. :

Signature of the Candidate

Accountant's Signature

CHECK LIST

Documents (Attested)	Remarks	
Photocopy of 10th Std. Mark Sheet	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Photocopy of 12th Std. Mark Sheet	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Photocopy of Graduation Mark Sheet	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Photocopy of Post Graduation Mark Sheet	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Photocopy of Work Experience (If Any)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Photocopy of Identity Proof (Compulsory)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

FOR OFFICE ONLY

Prospectus issued

Admitted Yes No

Co - ordinator _____

DECLARATION

I, hereby, declare that all the statements made in this application form are true, complete and correct. In the event of any information being found false or in correct or ineligibility before or after selection, action will be taken by the Academy as deemed fit against me.

Date _____

Signature of the Candidate

Signature of the Authority
(SEAL)