



APPLICATION FORM NO. _____

**DR.H.M. PATEL SCHOOL OF INTERIOR DESIGN
ARVINDBHAI PATELINSTITUTE OF ENVIRONMENTAL DESIGN**

Near Bhaikaka Library, Vallabh Vidyanagar-388 120

Phone : (02692) 235179 Fax : (02692) 237586

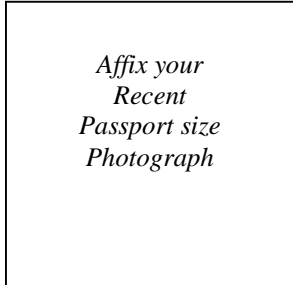
Email : directorapied@hotmail.com Web Site : apied.edu.in

**APPLICATION FOR ADMISSION TO FIRST SEMESTER OF TWO YEAR
MASTER OF INTERIOR DESIGN PROGRAMME - 2011**

(Affiliated to S.P. University, Vallabh Vidyanagar)

NOTE:

1. Application form to be filled by the applicant in his / her own handwriting.
2. Late submission of Application Form / Certificates will not be accepted.
3. Applicant to produce a Portfolio of student / Professional works and Original certificates at the time of Interview.



*Affix your
Recent
Passport size
Photograph*

1. Name of the student in block letters
(Beginning with surname) _____
2. Date of Birth _____ Place of Birth _____
3. Nationality _____ Male / Female _____
4. Permanent Address _____
(Fax No. & E-mail address, if any) _____

Ph.No _____ Mb. _____
5. Local Address _____
Address for Correspondence _____

Ph.No _____ Mb. _____
6. Parents Occupation _____
If in employment, designation _____

Annual Income of Rs. _____

APPLICATION FORM FEES : Rs.200=00

APPLICATION FORM NO. _____

**DR.H.M. PATEL SCHOOL OF INTERIOR DESIGN
A.P.I.E.D., VALLABH VIDYANAGAR**

IDENTITY CARD / ACKNOWLEDGEMENT

1. Name of Applicant : _____
(Surname first)
2. Present Address for : _____
Communication _____



*Affix your
Recent
Passport size
Photograph*

Date : _____

For Administrative Officer

7. **EDUCATIONAL DETAILS:**

Examination	Examination Body/ University	Year of Passing	% of Marks	Class Obtained
GRADUATION: <ul style="list-style-type: none"> • Degree / Diploma in Architecture approved by the Council of Architecture or its equivalent from a recognised University. • 3 Years Bachelor of Interior Design or its equivalent from a recognised University & an Office Training of 6 months necessary. 				
Any other				

8. I would like to join this programme for the following reasons:

I have carefully gone through the Bulletin of the Institute and shall be responsible for the conduct of my son/daughter during his / her study the Institute.

I also undertake to pay regularly all his / her fees, dues including expenses of site visits, educational tours, etc as required during the academic programme.

Signature of Parent / Guardian

Signature of Applicant

Place : _____

Date : _____

Please enclose:

1. Attested copies of Certificate / Marksheets of H.S.C., Degree/Diploma and Higher Qualification.
2. Certificate of Practical Training.
3. Recommendation letters to whom reference can be made.

Candidates will be intimated about the Schedule for Personal Interview by the Institute.