



Student Application Form

Name : _____

Gender : (Male) (Female) _____

Age (in years) : _____

Class : _____

Stream of Study (for Jr. College students) : _____

Contact Number : _____

Email ID : _____

Address : _____

Contact Person Name : _____

Contact Person Phone number : _____

To be filled by the school authority:

Certified that the above information given by _____
is a bonafide student of (School name) _____

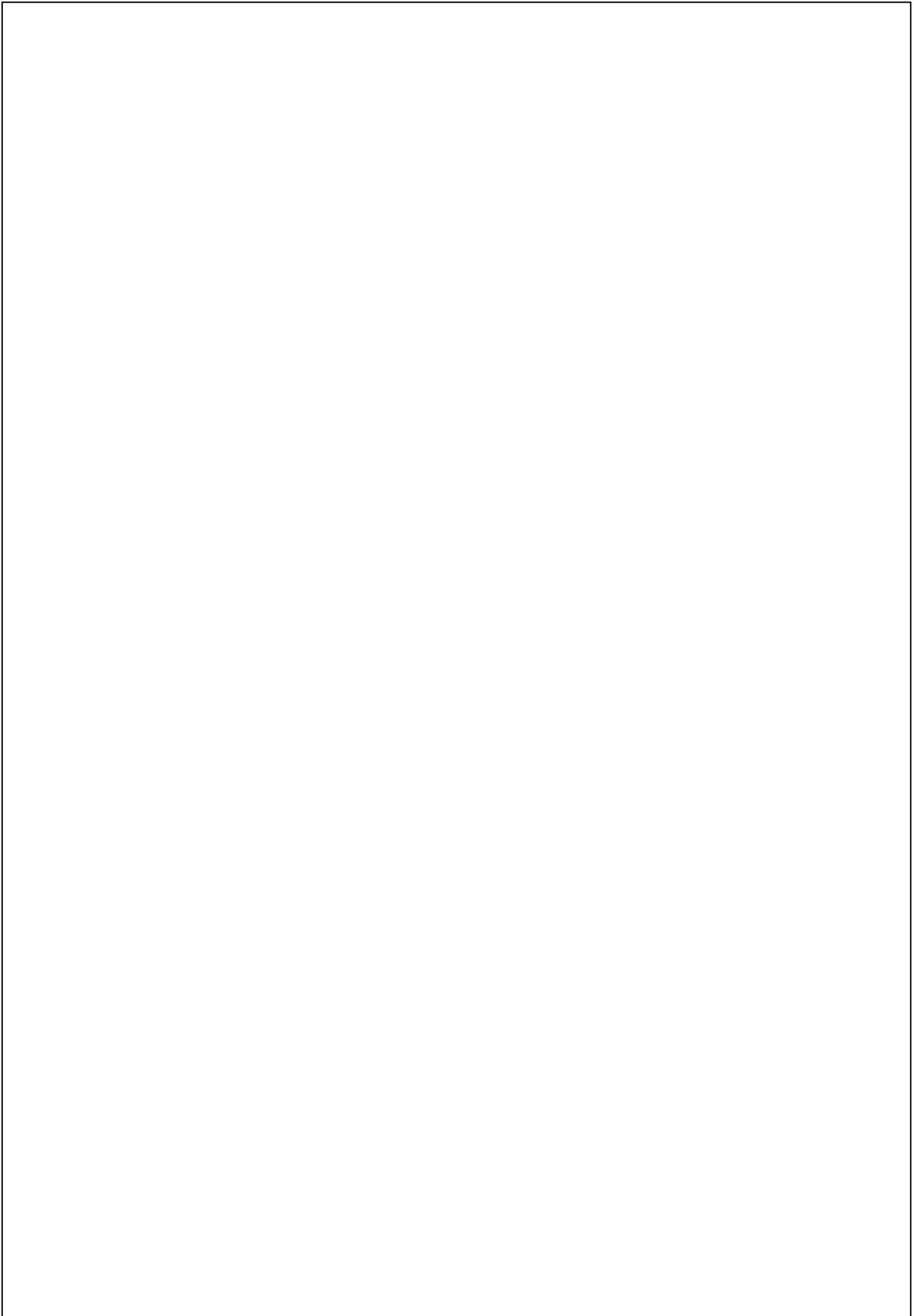
_____ and he/she is recommended for consideration in the
Design Studio Workshop.

(Signature)
School Principal

Date: _____

Seal

Draw a freehand pencil sketch of a product of your liking:



Write a small paragraph about your interest in design:

(Name and Signature of the applicant)

Date: _____

*The applications are to be send by post to the below mentioned address
by the student on or before Oct 10, 2015*

***Sajan Pillai,
205, Industrial Design Centre,
IIT Bombay, Powai, Mumbai - 400076***

The envelope should be superscripted with "Design Studio '15".

For any further information, you may contact Sajan @ 9969 800 287