



ALL STARS MEDIA COLLEGE

(Centre for Old & New Stars)
The Star is Our Light

Application Form

Name:

Date Of Birth:/...../..... (Please Tick) Male Female

Permanent Address:

Tel. / Mob.: E-mail:

Present Occupation:

Have you undertaken any related course of study? Please tick) Yes No

If yes, Name the type of course:.....

OTHER DETAILS:

Marital Status: (Please tick) Single Married

Height.....

Language Spoken.....

Nationality:.....

EDUCATIONAL BACKGROUND:

Primary School:.....Year.....

Secondary School:.....Year.....

University / Other higher Institution / Vocation.....Year.....

Have you acted in a commercial movie, Cast news or presented a Tv / Radio Programme before?

Witness: Name.....Tel:.....

Signature:.....Date:.....

I, Hereby declare that all the information provided are true and valid. I understand that

1. Fee must be paid in full
2. Fees paid is not refundable.

Signature of Applicant:.....

Date:.....

