



STUDIOS INDIA PRIVATE LIMITED

Apprentice Program Application Form

Date: _____

Name: _____

Address: _____

Contact Number: (Mobile) _____ (Residence) _____

E-Mail Address: _____

Education Qualification: _____

Contact Person details in case of Emergency: _____

Area of Interest (Specialization)

(Please rank area of interest starting from 1 to 6. For e.g.: if modeling is your top preference then you can rank 1 for Modeling, rank 2 for Texturing and so on)

Specialisation	Rank	Specialisation	Rank
Modeling		Compositing	
Rigging		Texturing	
Lighting		Animation	

Questions:

1) Why does this program interest you?

2) What are your short and long term career goals?