



UNIVERSITY OF KERALA
Application for Master of Visual Arts Entrance Examination - 2025

Name of the candidate	<input type="text"/>		
Gender	<input type="text"/>	Photo	Signature
Date of Birth *	<input type="text"/>		
Age *	<input type="text"/>		
Place of birth	<input type="text"/>		
Marital status *	<input type="text"/>		
Whether employed *	<input type="text"/>		
Annual Income	<input type="text"/>		
Religion*	<input type="text"/>		
Caste *	<input type="text"/>		
Community *	<input type="text"/>		
Reservation	<input type="text"/>		
Nationality *	<input type="text"/>		

Address

	Communication	Permanent
Address *	<input type="text"/>	
District	<input type="text"/>	<input type="text"/>
Mobile *	<input type="text"/>	Phone number (with STD code) <input type="text"/>
Pincode *	<input type="text"/>	Email * <input type="text"/>

Qualifying Exam Details

Examination(s) Passed	Name of the Board/University	Year of Passing	%	Class & CGPA
Matriculation/Equivalent				
Higher Secondary/Equivalent				
Graduation				

Courses Opted

Master of Visual Arts in Painting

Master of Visual Arts in Art History

Other Informations (if any)

Additional Information

Achievements (should submit proof along with application hard copy)

Fee Detail

Fee amount *

Payment Mode - Cash Counter/Friends/DD

DD / Receipt Date *

DD / Receipt Number *

Declaration

I hereby confirm and declare that all the statement made and information provided by me in this Application are true, correct and complete to the best of my knowledge and belief. I have read the notification clearly before filling the form. In the event of any information or the part of it being found false or incorrect before or after the admission process, action can be taken against me by the competent authority and my candidature will automatically be cancelled.

Place :

Date :

Signature of the Applicant

*Note : Columns Marked in * are Mandatory. All fields should be entered in block letters*