

**INLAKS THEATRE AWARDS - 2024**

**APPLICATION FORM**

COMPLETE ALL PAGES IN FULL

PERSONAL INFORMATION SHEET

Passport Size Photo

NAME: MR/MS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CORRESPONDENCE ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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TEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MOBILE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRESENT OCCUPATION:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EDUCATION QUALIFICATIONS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. OUTLINE OF YOUR PROJECT: This should include (Not more than 400 words)

(i) A short description of your intended practice

(ii) A timeline for the project

2. PERSONAL STATEMENT: Description of your practice and achievements (Not more than 300 words)

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| 3. Do give an introduction to whom you wish to work with / Guru during the award year (Not more than 300 words) |
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4. How will the funds from the award be utilized (Not more than 300 words)

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| 5. CURRICULUM VITAE: Age, nationality, your professional training (education, workshops, etc.) solo, group performances (if any) and any other professional activities relevant to your artistic practice |

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| 6. AUDIO/ VIDEO: To be sent as links on any of the following online platform such as artist website/ Vimeo/ Youtube/ Soundcloud  If links are password protected, please provide the password. |
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| 7. PROOF OF AGE: Copy of Aadhar card / Passport / Birth Certificate |
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| 8. PROOF OF NATIONALITY: Copy of Passport / Birth certificate |
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**Privacy Policy**

Your data will be transferred for the purposes of administering this opportunity and then be held with the Foundation indefinitely.

In these circumstances, your personal details like name, country, year of award, opportunity outline will be published in an online register.

The information you provide will be used:

1. To support and process the study/research/training period of your award/scholarship/fellowship/internship, including but not exclusively:

* To retain necessary records and, to support your practice/academic studies/training programme, including to seek feedback and results of your progress and completion (if applicable)
* To provide you with welfare advice if needed
* To provide you with means of financial support and to pay costs associated with the award

1. To support alumni engagement strategy, including but not exclusively:

* To send you email communications and briefings
* To invite you to webinars, lectures, events, and conferences post completion of the award
* To feature you on the INLAKS Foundation website and social media channels
* To feature you in print publications as needed

**Data recipients**

Your data may be shared with partners, e.g. university; the body that nominated you for an award/ scholarship/fellowship/internship; suppliers such as travel agents and printers; and partners such as providers of online application, email marketing, and project management systems and where necessary their internet providers.

No personal data other than your name, country, subject/theme of study, and host institution will be shared.

**Data transfers**

Your personal data will not be sold to any third parties or used for commercial purposes. Third parties with which we share your personal data are required not to sell it.

**Declaration**

I do hereby declare that the information given above is true to the best of my knowledge and belief and nothing has been concealed therein. I have also read, understood and accept the privacy policy as mentioned above. I am well aware of the fact that the information given by me if proved false / not true at any point of time, my application will not be considered.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_