NATIONAL ACADEMY OF PERFORMING ARTS

THEATRE DEPARTMENT — DIPLOMA PROGRAMME (3YEAR)

STUDENT ADMISSION FORM 2026

Please attach a recent photograph

1. Applicant Information

Full Name: _____

(Write in Capital Letters)

Date of Birth (DD/MM/YYYY): _____ **Gender:** □ Male □ Female

CNIC / B-Form No.: _____ **Nationality:** _____

2. Parent / Guardian Information

Father's Name: _____ **Father's CNIC No.:** _____

Mother's Name: _____ **Mother's CNIC No.:** _____

Guardian's Name (if applicable): _____

Relationship to Student: _____ **Guardian CNIC No.:** _____

Father / Guardian Occupation: _____ **Father / Guardian Contact No.:** _____

3. Contact Information

Permanent Address: _____

_____

Province: _____ **City:** _____

Residential Address: _____

_____

Province: _____ **City:** _____

Contact No.: _____ **Alternate Contact No.:** _____

Email Address: _____

4. Academic Qualification / Eligibility

**Matric / O Levels*

Institution Name: _____ **Year of Passing:** _____

Marks / Grade: _____

**Intermediate / A Levels*

Institution Name: _____ **Year of Passing:** _____

Marks / Grade: _____

Bachelor's / Other Qualification (if applicable)

Institution Name: _____ **Year of Passing:** _____

Marks / Grade: _____

Master's (if applicable)

Institution Name: _____ **Year of Passing:** _____

Marks / Grade: _____

Any Other Qualifications / Diplomas / Certificates (if applicable)

Institution Name: _____ **Year of Passing:** _____

Description / Grade: _____

☐ I certify that I have passed Intermediate (HSSC), A Levels, or an equivalent qualification and meet the minimum eligibility requirements for admission.
For A Levels or Other Foreign Qualifications:

☐ I have obtained / will submit an IBCC Equivalence Certificate (where applicable).

5. Professional Background

Current Profession / Occupation: _____

Current Employer (if applicable): _____

Previous Employment (if any): _____

Duration of Previous Employment: _____

Reason for Leaving (if applicable): _____

6. Previous Experience

Do you have previous training or experience in performing arts or a related field? ☐ Yes ☐ No

If yes, provide details:

_____

_____

_____

7. Why do you want to study at NAPA?

_____

_____

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_____

8. Medical Information

Do you have any medical conditions or allergies?

□ Yes □ No
If yes, please specify:

_____

Emergency Contact Person Name: _____ **Contact Number:** _____

9. Fee Structure

Stage	Amount
Audition Registration Fee (non-refundable, payable at time of registration)	Rs. 1,000
Admission Fee	Rs. 2,500
Tuition Fee	Rs. 24,000 / Term (4 Months)

Note: *Admission and tuition fees are payable only after successful clearance of the audition rounds.*

Bank Transfer Details

Title of Account: National Academy of Performing Arts

Bank Name: Bank Alfalah

Account No.: 0171-1003870294

Payment may also be made in person at the NAPA Accounts Office.

Payment Advice (to be completed by applicant)

Mode of Payment: □ Online Transfer □ Cash at Accounts Office
Transaction / Reference No. (if paid online): _____ **Date of Payment:** _____

Please attach a copy of the bank transfer receipt or deposit slip along with this form.

10. Legal Declaration

Are you currently involved in any pending legal proceedings, disputes, or litigation with any individual or institution?
□ **Yes** □ **No**
If yes, provide details:

_____

_____

11. Required Documents

Applicants must submit the following documents along with the completed admission form:

□ Duly completed Admission Form

□ Three (3) recent passport-size photographs

□ Copy of Applicant's CNIC or B-Form

□ Copy of Parent's/Guardian's CNIC

□ Proof of registration payment

□ Copies of all Educational Certificates and Transcripts/Mark Sheets (Matric/O Levels, Intermediate/A Levels, Bachelor's or any other qualifications, as applicable)

□ IBCC Equivalence Certificate (for A Levels or other foreign qualifications, where applicable)

□ Any additional supporting documents required by the Academy (if applicable)

Note

• Admission is subject to submission of all required documents, successful completion of both selection rounds, and clearance of all dues.

• Incomplete applications or missing documents may result in a delay or rejection of the admission process.

• The Academy reserves the right to verify the authenticity of all submitted documents.

12. Declaration

I declare that all information provided in this application is true and complete. I understand that admission is subject to verification of my academic qualifications and supporting documents. I agree to abide by the rules, regulations, and policies of the Academy.

I understand that any false statement made in this form, or any material information later found to have been concealed, may result in immediate expulsion regardless of academic standing.

I understand that the 3-Year Diploma is a full-time commitment. Timings, including additional rehearsals and classes, may be adjusted for academic or operational reasons; I am expected to remain available accordingly.

Applicant's Signature: _____ **Date:** _____

Parent/Guardian Signature (if applicable): _____

For Office Use Only

Application No.: _____ **Date Received:** _____

Eligibility Verified: □ Yes □ No **Documents Complete:** □ Yes □ No

Group Assigned: _____ **Batch:** _____

Admission Approved By: _____