**Application**

# Digital Story Telling Competition 2022

|  |  |
| --- | --- |
| Personal information | |
| Name |  |
| Age |  |
| Contact Information | Fixed: Mobile: e-mail: |
| Address (permanent): |
| For school applicants | Name of the School |
| Grade |
| For University applicants | Name of the University: |
| Faculty: |
| Position: undergraduate /postgraduate/staff |
| For adult applicants/ | Occupation: |
| Institution: |
| Title of your video |  |
| Brief description of your video (in max. 100 words) | |
|  | |

For school children

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Signature of class teacher

…...............................................

Signature of the Principal

(with stamp)