



Ref: DPSG/Cir/15-16/Admn: 46

Date: 25.06.15

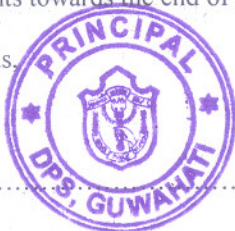
Dear Parent,  
Greetings!!!

Filmmaking, like any other art, is a very profound means of human communication while it also gives platform to students for self employment in future. DPS Guwahati in collaboration with Jyoti Chitraban Film and Television Institute (JCFTI), Guwahati is planning to organise a film making course for students the details of which are given below:

1. The course will approximately be of 84 hrs, twice a week after the school hours or on holidays.
2. Students of Classes IX to XI are eligible for the workshop.
3. One time registration and course fee is Rs. 2000/- only per child.
4. Registration of students shall be on first come first serve basis owing to limited availability of seats.
5. The course will comprise of theory and practical components like script writing, editing, sound engineering, handling DSLR and movie cameras etc.
6. Classes shall be conducted by qualified professionals from JCFTI, and eminent film directors through a well structured curriculum.
7. Parents who are desirous to enroll their ward(s) for the workshop may kindly fill up the consent pro forma attached herewith and submit the same to the Accounts Dept. of the school along with a nonrefundable course fee of Rs 2000/- on or before 27-07-2015.
8. Students may be exposed to variety of studios and film making institutes.
9. The students are recommended to possess their personal DSLR camera. However it is not mandatory as the school will be able to provide the equipments in group.
10. The students towards the end of the course will be able to make their own documentary/ short films.

With sincere regards,

  
Principal



CONSENT

I Mr/Ms..... P/O Master/Miss.....Class/Sec .....hereby give my consent for enrolment of my ward to the Filmmaking Workshop organised by the school and depositing a nonrefundable sum of Rs 2000/- in the Accounts Dept. of the school as course fee. In case of any unforeseen incident during outdoor activities I shall not hold the school responsible.

Signature of parent with date

Contact no: \_\_\_\_\_