



Ministry of Culture  
Government of India

सत्यमेव जयते



ललित कला

## LALIT KALA AKADEMI

### Regional Centre, Lucknow

1-Ekta Vihar, Aliganj, Lucknow-2260224

Tel: 0522-2324067

### ADMISSION TO COMMUNITY STUDIOS OF PAINTING, GRAPHIC, SCULPTURE & CEREMIC

Applications are invited from eligible artists for admission to Community studios of Painting, Graphics, Sculpture & Ceramic at Lalit Kala Akademi, Regional Centre, Lucknow for the session 1<sup>st</sup> May 2021 to 30 April 2022. The application forms for admission to community Studios is available free of cost at the Regional Centre, Lucknow. Interested artist may seek for application through Email: [lalitkalarclko@gmail.com](mailto:lalitkalarclko@gmail.com) and duly filled form may be submitted at Regional Centre, Lucknow on all working days (except Saturday and Sunday) between 11 AM to 5 PM. The last date for submission of application form is 15<sup>th</sup> April 2021.

**Due to Covid-19 pandemic the last date for submission of application form has been extended upto 15th May 2021.**

Dr. Uttam Pacharne  
Chairman  
Lalit Kala Akademi, New Delhi

Dr. Devendra Kumar Tripathi  
Regional Secretary  
Regional Centre, Lucknow

Type of studios you intend to work  
Please tick any one

- Community Studio (Sculpture)
- Community Studio (Ceramics)
- Community Studio (Graphics)
- Community Studio (Painting)

Application No.



**LALIT KALA AKADEMI**  
**REGIONAL CENTRE – LUCKNOW**

Affix Passport  
Size  
Photographs

**Application form for Community Studios of Lucknow**

1. Full Name: Last Name \_\_\_\_\_ First Name \_\_\_\_\_
2. Date of Birth \_\_\_\_\_ Date \_\_\_\_\_ Month \_\_\_\_\_ year \_\_\_\_\_ Sex: Male/Female
3. Qualification \_\_\_\_\_
4. LKA ID No., If any \_\_\_\_\_
5. Address \_\_\_\_\_  
\_\_\_\_\_

Pin: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_

6. Are you receiving any scholarship or aid at present?  
If yes, Please furnish particulars
7. Type of LKA studio used and duration
8. Particulars or significant work done or exhibition/s held in the 5 years ( give details)  
Catalogue/latest photographs of your work, if required, please attach separate sheet
9. Do you have a studio of your own or access to other studio facilities?  
Please tick Yes  No

I hereby declare that all the information given in the application are true and complete to the best of my Knowledge and belief, If anything found wrong/misinformation, my application will be treated as cancelled.

Place:

Signature of Artist

Date:

## **Criteria for Community Studios:**

Artist who passed the qualification in the respective field like “BFA/MFA or Diploma/Post Diploma” from the recognized University/Institution.

Preference will be given to the artists who are in receipt of Lalit Kala Akademi/HRD Scholarships. The advisory-cum-admission committee may consider specific application, respective of qualification as mentioned above of the artists on merits who have been working continuously in the art field for many years in the respective field.

Artist waiting to be admitted will be given preference as per the criteria over others.

Name of the Artist:

Community Studio:

This should indicate the studio you intend to work

List of five recent works

Serial Number	Title	Medium	Size in cms	Year

I hereby declare that I have attached five work photographs (as mentioned above) of my recent works in support of my application.

Place:

Signature of Artist

Date:

**LALIT KALA AKADEMI  
REGIONAL CENTRE – LUCKNOW**

**Appendix II**

**Written Undertaking**

I .....Son/daughter/wife of.....  
resident of ..... do hereby solemnly affirm and declare and give an  
undertaking as under.

1. That I have gone through the rules & regulations that govern the admission to the Community Studio of the Akademi at Lucknow and undertake full responsibility to abide by them.
2. That I will be responsible to bring my own materials to execute my own work.
3. That I will not use the Workshop for any commission work without approval of Akademi.
4. That I will make payment for all supplies and services before or immediately after receiving them and payment of all monthly dues before 7<sup>th</sup> of every month to which they relate. If I default, I will have no claim to continue to work in the Studio.
5. That I will myself use the space allotted to me and will not allow anyone else to use it.
6. That I will remove all my works & material from the studio premises as soon as my term of admission is over in the Studio. The Akademi has my authority to remove them at my cost if I fail to remove them and hired them over to anyone willing to take them or to deposit them outside the studio premises in a public place or public land and I indemnify the Akademi against their loss or theft on such removal.
7. That I will take prior permission if I do not work in the studio for more than 3 days at a stretch and agree that the Akademi has right to cancel my admission if I absent beyond 3 days without permission of Supervisor or Officer-in-Charge of Studio.
8. That I agree that the Office of Studio of Lalit Kala Akademi will not be responsible for any loss or damage to me and my property due to fire, accident, thefts, seepage, white ants etc.
9. That I will help in proper upkeep of the Studios.
10. That I agree that Secretary may cancel my Admission after placing the matter for recommendation before the Admission Committee, if my work or habit is not considered satisfactory and meriting cancellation of the allotment.

Signature of Artist

Accepted

Name in Block Letters

Regional Secretary  
Lalit Kala Akademi  
Regional Centre  
Lucknow