**महिला चलचित्रकर्मी** (निर्देशक, कलाकार, निर्माता, प्राविधिक, प्रदर्शक, वितरक, गायिका आदि) **को परिचय विवरण फारम**

**Introduction DETAILS FORM for Female Artists / Filmmaker**

(Film Director, Actor, Producer, Technician, Exhibitor, Distributor, Musician, Singer etc.)

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| **श्रीमान् अध्यक्षज्यू,**  **चलचित्र विकास बोर्ड,** चाबहिल, काठमाडौं ।  **विषयः– परिचय विवरण उपलब्ध गराईएको सम्बन्धमा ।** | | | | | | | | | | | | | | | |
| उपरोक्त सम्बन्धमा तहाँबाट माग भए बमोजिमको परिचय विवरण उपलब्ध गराईएको व्यहोरा अनुरोध गर्दछु । | | | | | | | | | | | | | | | |
| **१.** | **परिचय विवरण (Introduction):** |  | | | | | | | | | | | **फोटो** | | |
|  | **पूरा नाम (देवनागरीमा)** |  | | | | | | | | | | | | | |
|  | **Full Name** (In English): |  | | | | | | | | | | | | | |
|  | **जन्म स्थान** (Birth Place): |  | | | | | | | | | | | | | |
|  | **स्थायी ठेगाना** (Permanent Address): |  | | | | | | | | | | | | | |
|  | **जन्म मिति** (Date of Birth): |  | | | | | | | | | | | | | |
|  | **बाबुको नाम¸ थर** (Father's Name): |  | | | | | | **आमाको नाम¸थर** (Mother's Name): | | | | | | | |
|  | **सम्पर्क (Contact Details**): | **मोबाइल नं.** (Mobile No.): | | | | | | | | | | | |  | |
|  | **ई–मेल ठेगाना (E-mai**l): |  | | | | | | | | | **फोन नं.** (Phone): | | |  | |
| **२.** | **शैक्षिक योग्यता** (Education): |  | | | | | | | **३. अध्ययनको विषय** (Subjects of Study): | | | | | |  |
| **४.** | **चलचित्र सम्बन्धि वर्कसप / तालिमहरु** (Film related workshops / Trainings): | | | | | | | | | | | | | | |
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| **५.** | **चलचित्र क्षेत्रको अनुभव (Experience in the Film Industry)**: | | | | | | | | | | | | | | |
|  | **चलचित्रको नाम** (Name of Films): | | | | **विधा /भुमिका** (Genre/Role): | | | | | **प्रथम प्रदर्शन मिति** (First Release Date): | | | | | |
| **(१)** |  | | | |  | | | | |  | | | | | |
| **(२)** |  | | | |  | | | | |  | | | | | |
| **(३)** |  | | | |  | | | | |  | | | | | |
| **६.** | **पुरस्कार/मानसम्मान/उपलब्धिहरु** (Awards/Honors/Achievements): | | | | | | | | | | | | | | |
|  | **पुरस्कारको नाम (Name of Award)** | | **विधा (Genre)** | | | | **वर्ष (Year)** | | | **प्रदान गर्ने संस्था (Providing Institution)** | | | | | |
| **(१)** |  | |  | | | |  | | |  | | | | | |
| **(२)** |  | |  | | | |  | | |  | | | | | |
| **(३)** |  | |  | | | |  | | |  | | | | | |
| **७.** | **लेख/रचना/ प्रकाशन** (Article/ Composition/Publications): | | | | | | | | | | | | | | |
| **(१)** |  | | | | | | | | | | | | | | |
| **(२)** |  | | | | | | | | | | | | | | |
| **(३)** |  | | | | | | | | | | | | | | |
| **८.** | **चलचित्रसंग सम्बन्धित आवद्धता सम्बन्धी विवरण** (Details related to the film): | | | | | | | | | | | | | | |
|  | **संस्थाको नाम (Name of the Institution)** | | | **पद (Position)** | | | | | | | | **अवधि (Period)** | | | |
| **(१)** |  | | |  | | | | | | | |  | | | |
| **(२)** |  | | |  | | | | | | | |  | | | |
| **(३)** |  | | |  | | | | | | | |  | | | |
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| **९.** | **अन्य केही विवरण भए उल्लेख गर्नुहोस** (Mention any other details): | | | | | | | | | | | | | | |
| **(१)** |  | | | | | | | | | | | | | | |
| **(२)** |  | | | | | | | | | | | | | | |
| **(३)** |  | | | | | | | | | | | | | | |
| **१०.** | **विदेश भ्रमण** (Visit Abroad): | | | | | | | | | | | | | | |

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|  | **(नामः )** |
|  | पूरा नाम तथा दस्तखत |

**संलग्न गर्नुपर्ने कागजातहरुः**

(१) प्रमाणपत्रका प्रतिलिपिहरु र तस्वीरहरु , (२) High Resolution Profile Photo दुई प्रति

***द्रष्टव्यः*** यो विवरण भरी चलचित्र विकास बोर्डको कार्यालयमा वा ईमेल ठेगाना ccmsfdb079@gmail.com मा पठाउन सक्नु हुनेछ ।