



Application Form

“Attach the photocopies of Date of Birth Certificate, Educational and Professional Qualifications along with the duly filled Application Form.”

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Passport
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Self
Attested

Post Applied For: _____ Advt. No: _____

1. Applicant Name: _____
(in Block Capital letters)

2. Father's/ Spouse Name: _____

3. Date of Birth: _____ Age: _____ Years _____ Months _____ 4. Category: _____

4. Sports Specialization: _____

5. Permanent Address: _____

6. Address for communication: _____

Pin: _____ 7. Gender: Male/ Female

8. Ph. No. / Mob. No. : _____ Email: _____

9. Educational Qualifications:-

Exam. Passed	Year	Board / University	% marks and Division

10. Experience Details:-

Post / Designation	Organization	Duration		Total Experience (Months / Year)	Salary Drawn
		From	To		

I hereby declare that all information is true to the best of my knowledge and belief. If any fact found false, my candidature may be canceled and I understand that I will be denied any employment in the Institute and if already employed on any of the posts in the Institute, my services will be terminated forthwith.

Date: _____

Place: _____

Signature of the Candidate