Format

KENDRIYA VIDYALAYA SANGATHAN

NATIONAL SCHOOL GAMES 2023 TO 2024

Under the aegis of School Games Federation of India

 Name

Certificate of Eligibility With date dully

 Attested by the Principal

 Head Master with stamp

 Age Group Under : ………………. Boys / Girls

|  |  |  |
| --- | --- | --- |
| 01 | Name of the Participant(In Block Letters) |  |
| 02 | Father’s Name(In Block Letters) |  |
| 03 | Mother’s Name (In Block Letters) |  |
| 04 | Name of the School(In Block Letters) | KENDRIYA VIDYALAYA, AFS , OJHAR |
| 05 | Full Address of the School (In Block Letters) | AIR FORCE STATION, OJHAR. DIST : NASHIK. STATE : MAHARASHTRA. PIN - 422221 |
| 06 | School’s Phone Number with Code No. | (02550) - 295023 |
| 07 | Last Year Registration No. of SGFI | N A |
| 08 | Date of Birth (i) In Fig. (ii) In Words  |   |
| 09 | Aadhar Number |  |
| 10 | Passport Number (if available) | NA |
| 11 | Discipline/Event/Game |  |
| 12 | Age in completed years as on 31st December 2023 |  Year Month Days |
| 13 | Permanent Address & Phone / Mobile No.(In Block Letters) |  |
| 14 | Admission No. & Year |  |
| 15 | Date of Joining the School |  |
| 16 | Standard & Section Studying this Year |  |
| 17 | Standard Studying Last Year |  |
| 18 | Bank Details of participant(If no then mention Mother’s / Father’s A/C No.) | Name : |
| Name of Bank : |
| A/C No. :  |
| IFSC Code : |
| 19 | Personal Identification Marks |  |
|  |
| 20 | Signature of the Participant |  |

Certificate : 1. Certified that the above participant is a bonafied student of this institution for the academic year.

 2. Certified that I have personally verified the admission records maintained in the School and found correct.

 3. Certified that it is understood in the event of information furnished above found to be partly or wholly untrue, the above
 student is liable to be disqualified for a period of two years in case the students is a member of the team,

 then the participant is liable to be disqualified as a whole.

Signature of Competent Authority Signature with Seal Signature with seal of the

 of State / UT / Unit with Seal Manager / Coach Head of Institution / Principal

 Post / Desn : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Head Master

For Office Use Only Name of the Invigilator : ………………………………………………… Sign. Of Invigilator : ……………………………..

**MEDICAL CERTIFICATE**

This is to certify that -------------------------Of class---------- of **KendriyaVidyalaya AFS Ojhar Nasik-**, has been medically examined by me. he is not suffering from any disease. he is fit to participate in Games & sports event

Date:--

Place:- OJHAR

 **-**SIGNATURE of Medical Officer with seal

**NO OBJECTION CERTIFICATE OF PARENT.**

I have no objection in sending my ward \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Of class \_\_\_\_\_\_\_\_for participation of his KVS National Sports meet 2022. And if selected for different level and further participation at – KVS National meet.

w .e .\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **TO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** In the event of the selection of my ward I will have no objection to send him, as per mentioned above level and venue with the escort teacher.

 Yours Faithfully,

Date:

 Sign. Of parents.

Place: - AFS OJHAR Name of Parents:

 Ph.-

**RISK CERTIFICATE OF PARTICIPANT AND PARENTS**

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_of Class \_\_\_\_\_\_\_\_resident Of Ojhar Agree to take Part in / KVS National Sports meet2022.organized by KVS declared that I am doing it at my own risk and responsibility I further declare that KVS shall not in any way be liable to me or my dependents for any loss, Damage. Disability or injury being sustained by me from my participation in the above mentioned.

Date: -

Place ;-AFS OJHAR Yours Faithfull

 NAME of Participants :-

 Sign. Of the Participants

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_father of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_of class \_\_\_\_\_\_\_\_\_\_ ­­­­­­­have no objection in my Son participating in KVS National Sports meet 2022 organized by KVS w. e. f \_\_\_\_\_\_\_\_\_\_\_\_\_\_**to-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date;-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Yours faithfully

 Name of Parents:-

Signature .Of Parents:-