APPLICATION FORM:

PHOTOGRAPH

- 1. Full Name in Capital Letters (As per the Matriculation Certificate):
- 2. Gender:
- 3. Date of Birth (As per the Matriculation Certificate):
- 4. Father's Name (As per the Matriculation Certificate):
- 5. Nationality:
- 6. Post Applied For:
- 7. Permanent Address:
- 8. Address for Communication:
- 9. Mobile number and Email ID (a valid and functional email ID to be provided):
- 10. Academic Qualifications:

QUALIFICATION	NAME AND ADDRESS OF COLLEGE/INSTITUTION	UNIVERSITY	YEAR OF PASSING
10 th			
Higher Qualification			

11.Details of Services rendered earlier/Experience in related field: (After the Basic Graduation).

Post/Designation	Name and Address of the Organization	Duration of Tenure		Total Period
		From	То	

Declaration: I solemnly declare that the above statements made by me are correct to the best of my knowledge and belief. I shall abide by the rules and regulation of Sports Authority of India.

Name & Signature of Candidate