

APPLICATION FORM

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. Proof of Identity:
11. Academic Qualifications:

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Qualification	Name And Address of College / Institution	University	Year of Passing
Matriculation or its equivalent from a recognised Board.			
General Nursing and Midwifery from a recognised Institution or equivalent qualification for male nurses.			

12. 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	To	

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