

SPORTS AUTHORITY OF INDIA NORTH EAST REGIONAL CENTRE, IMPHAL

Recent colored Passport Size Photograph

APPLICATION FORM FOR THE POST OF JUNIOUR COUNSULTANT (INFRA)

1. Full name	in capital letters (as per the mat	triculation certificate):		
2. Gender:				
3. Date of bi	rth (as per the matriculation cert	tificate):		
4. Father's n	ame (as per the matriculation ce	ertificate):		
5. Nationalit	y:			
6. Post appli	ed for:			
7. Permanen	t Address:			
8. Address for	or communication:			
9. Mobile nu	umber and Email ID (a valid and	d functional email ID to	be provided):	
10. Proof of i	dentity:			
11. Academic	e Qualifications:			
Qualification	Name and address of College/Institution	Universit on	y Year of passing	Percentage
12. Details of	f services rendered earlier/exper	rience in related field:	(After the basic gra	aduation).
12. Details of Post/Designa		rience in related field: Duration		duation). Total period
	tion Name and address of			·
	tion Name and address of	Duration	of tenure	·

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