E-mail

प्रेशक

निदेशक माध्यमिक शिक्षा हरियाणा पंचकूला।

सेवा में.

समी जिला शिक्षा अधिकारी, हरियाणा राज्य।

यादी कमांक 12/1-2014 सी.सी.ए(2) दिनांक, पंचकूला:- 3\- 7 - 20)4

विषय:— वर्ष 2014—15 के दौरान खण्ड, जिला व राज्य स्तरीय स्कूल खेल प्रतियोगिताओं में भाग लेने वाली सभी टीमों के New Eligibility Form व Entry Form भेजने बारे।

उपरोक्त विषय के सन्दर्भ में।

आपको इस पत्र के साथ New Eligibility Form व New Entry Form भेजते हुए निर्देश दिए जाते है कि वर्ष 2014—15 में खण्ड, जिला व राज्य स्तरीय स्कूल खेल प्रतियोगिताओं में भाग लेने वाले खिलाडियों / टीमों हेतु इन दोनों Form का प्रयोग करना सुनिश्चित करें । इन दोनों Form के अतिरिक्त कोई अन्य Eligibility Form व Entry Form मान्य नहीं होगा।

संलग्न:--उपरोक्तानुसार

किट्या है ते। उप-निदेशक (खेल) कृतेः निदेशक माध्यमिक शिक्षा विभाग, हरियाणा,

पंचकूला। 2012/2014

ELIGIBILITY FORM

Haryana Schools Tournament-2014-15 Age Group____Boys/Girls

	Venue	From	to	_Game/I	Event
1.	Block/District/State:-				Paste here attested Photo
2.	Name of participant (in block letters)				with Principal Stamp and Signature
3.	Father's Name				
4.	Mother's Name				
5.	Home Address				
6.	Contact Number				
7.	Date of Birth: (i) (ii) in words			_	
8.	Age in completed year	rs as on 31st Dece	mber 2014:	_Year_	MonthDays
9.	Name of the Institutio	n:			
10.	Date of Admission in	School:			
11.	Present Class & Admi	ssion No. :			
12.	Year of passing 5 th , 8	th , 10 th :			-
13.	Percentage of attendar	nce:			
14.	Two Prominent marks	s on the body:-			
	i)		(ii)		
15.	Signature of the Stude	ent:			
16.	Sports fund paid so fa	r for the year 201	3 - 2014 :-		
a). Str	ength of students from	VI -VIII fund/am	ount paid with pro	of Rs	
b). Str	ength of students from	IX- X fund/amou	nt paid with proof	Rs	
	_		_	_	s
		_	_		
7	Total fund/Amount paid	l Rs			

Certificate:- 1. Certified that the above participant is a bonafide student of this institution for the academic year 2014-15.

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

ENTRY FORM

Father's Name	Mother's Name	Name of the School	Date of Birth	Class			Date of Admn. In Class	Year of passing 5 th , 8 th or 10 th	Event	Signature
				Father's Name Mother's Name Name of the School Date of	Father's Name Mother's Name Name of the School Date of Class	Father's Name Mother's Name Name of the School Date of Class Admn No.	Father's Name Mother's Name Name of the School Date of Class Admn No. Date of Admn.	Father's Name Mother's Name Name of the School Date of Class Admn No. Date of Admn. Date of Admn.	Father's Name Mother's Name Name of the School Birth Class Admn No. Date of Admn. In School In Class Str., 8" or 10th School S	AGE GROUP BOYS/GIRLS DATES FROM TO Venue Father's Name Mother's Name Name of the School Date of Birth Class Admin No. Date of Admin In School Date of Admin In Class Sh, 8th or 10th Class Sh, 8th or

Signature Team Incharge With seal **Signature**Zonal/ District Secretary

Signature AEO with seal

Signature Head of School with seal