



**National Institute of Sports Science**  
**Coaches Registration Programme**  
**Certificate Course in Coaches Skills Development – 2021**

**Reg. No:**

**Please indicate your field of Coaching**

Photograph  
(Passport Size)

**Name with Initials  
(Mr./Mrs./Miss)**

**Address (Private)**

**Address (Official)**

**Contact No  
(Private)**

**Contact No  
(Official)**

**Email Address**

**Date of Birth**

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**NIC No**

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**Designation**

**Service Experience**

**Professional Qualifications (Sports)**

	Course	Institute	Duration

**Academic Qualification:  
G.C.E. (O/L)**

<i>Subject</i>	<i>Grade</i>	<i>Subject</i>	<i>Grade</i>
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**G.C.E. (A/L)**

*Subject*

*Grade*

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**Any other Qualifications:**

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**Achievements – As a Player** (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 <sup>st</sup> ,2 <sup>nd</sup> ,3 <sup>rd</sup> or Participated)

**Achievements – As a Coach** (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 <sup>st</sup> ,2 <sup>nd</sup> ,3 <sup>rd</sup> or Participated)

**I hereby certify that the information given above are true and accurate to the best of my knowledge.**

.....  
Date

.....  
Signature