

## National Institute of Sports Science

Application Form – 2022
Certificate Course in Sports Science – level I/ level II

Reg. No:
----------

Course applied			Photograph (Stamp Size)
Name with Initials (Mr./Mrs./Miss)			
Address (Private)			
Address (Official)			
Contact No (Private)		Contact No (Official)	
Email Address			
Date of Birth NIC No			
Designation		Service Experience	
Professional Qualification Course	ons (Sports)	Institute	Duration
G.C.E. (O/L)			
Subject	Grade 	Subject	<i>Grade</i> 

G.C.E. (A/L)				
Subject	Gra	de		
any other Qualifications:				
	• • • • • • • • • • • • • • • • • • • •	•••••		•••••
Achievements – As a Player (	Please list	down priority first)		
No Name of the Tourna	ment	Level	Event	Effect
		(International, National, Province, District)		(1 <sup>st</sup> ,2 <sup>nd</sup> ,3 <sup>rd</sup> or
				Participated)
Achievements – As a Coach (F	Planca list (	down priority first)		
No Name of the Tourn	ament	Level	Event	Effect
		(International, National, Province, District)		(1 <sup>st</sup> ,2 <sup>nd</sup> ,3 <sup>rd</sup> or
				Participated)
Whether you are prepared to pa	•	e fee of Rs. 7,000/= (leve	l - I) if selected:	
		• • • • • • • • • • • • • • • • • • • •		•••••
I certify that the particulars give				
me are found to be false or inco	orrect, I ar	n liable to be disqualified	and removed from	n the course.
I hereby certify that the infor	mation g	iven above are true and	accurate to the h	est of my knowledge.
	<b>8</b>			J
Date			Signature	

## Director, National Institute of Sports Science: I recommend herewith the application of Mr./Mrs./Miss.... Employee of......working as..... and I also agree to release him/her from work he/she holds for the period of the course in the event of being selected. Address: ..... ..... ...... (Confirmation with the rubber frank) Signature of the head of department Date . Name of the Certifying Officer . Designation .

For Government/Local Government/Corporation Employees only: