

National Institute of Sports Science Physical Fitness Instructor Training Course

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<u>Application Form – 2019</u>

	e with initial /Mrs. / Miss										
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Addr	ess(private)										
Addr	ess(official)										
Contact No (Private)			Contact No (Official)								
Emai	l Address										
Date No	of birth			NIC							
	gnation			Service experience							
Cour	ses flowed i	n the field of	sports (if any)			L					
	Course			Institute			Duration				
Educ	ational Qual	lifications: G	c.C.E. (O / L)								
	Sub	oject	Grade	S	Subject		(Grade			

G.C.E(A/L)

	Subject	Grade						
Any other Qualification:								
I hereby certify that the information given above are true and accurate to the best of my knowledge.								
Date:	e: - Signature:-							