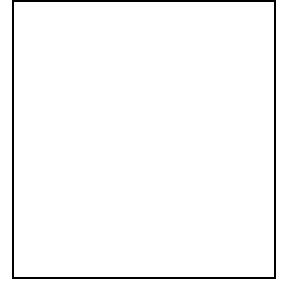




Region.....Zone.....

CISCE REGIONAL/NATIONAL GAMES & SPORTS 2020

Certificate of Eligibility



Latest photo duly
attested by the Principal/
Headmaster with stamp

Name of the Event.....

Age Group Under..... Boys/Girls

1.	Name of the Participant (In Block Letters)			
2.	Father's name (In Block Letters)			
3.	Mother's Name (In Block Letters)			
4.	Name of the School (In Block Letters)			
5.	School Code			
6.	Full Address of The School (In Block Letters)			
7.	School's Phone No with STD Code			
8.	Date of Birth (i) in Figure			
	(ii) In Words			
9.	Aadhar Number (Mandatory)			
10.	Passport Number (If available)			
11.	Permanent Address (In Block Letters)			
	State			
	Pin Code			
12.	Contact Number of the Student (Mobile No)			
13.	Admission No. & Year			
14.	Date of Joining the School			
15.	Standard & Section Studying this Year			
16.	Standard Studying Last Year			
17.	Insurance Details:			
	a. Name of the Insurer			
	b. Policy Value			
18.	Shoulder Size for Tracksuit/T-shirt (In Inches)			
	Signature of the Participant			

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

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

Signature with seal of the
Principal Coordinator

Signature with seal of
Regional/Zonal Coordinator

Signature with seal of
Head of the Institution/
Principal

CISCE NATIONAL GAMES AND SPORTS UNDERTAKING FORM

I, _____ son/daughter of _____
and student of (Name of the School & School
Code) _____
studying in _____ selected for the
(Name of the event) _____ U14/17/19 Boys/Girls,
hereby undertake that:

1. I will not represent my Home State in the National School Games after my selection in the CISCE National Team for _____ event. I am also aware that I will be liable for debarment (minimum period of two years) from any CISCE organised sports event, if I represent my Home State after selection at the CISCE National Games & Sports.
2. I will also intimate the CISCE office through my school principal (by email to sports@cisce.org) at least 15 days prior to the event, in case I am unable to participate in the National School Games (SGFI) for any reasons. I am aware that I will be debarred from participating in any CISCE Games and Sports event for a period of two years, if I fail to do so.

Signature of
Participant

Signature
of the Parent

Attestation
of the Principal