SPORTS PERSON IDENTIFICATION CERTIFICATE / CARD

Photo with principal's Signature along with seal (no facsimile)

Please fill up all the column legibly with block letters or type

1	Name of the Institution	
	(in Block Letters)	
2	Name of the Participant	
	(in Block Letters)	
3	Name of the Father/Guardian	
4	i) Admission No & Year	
	ii) Date of Birth	
5	Class in Which Studying	
6	Game (s) / Event (s)	
7	Personal identification marks	
	(fill up clearly)	
8	Signature of the Participant	

Certificate:

- 1. The above participant is a bona fide student of this institution for the academic year
- 2. The information provided here are based on the records maintained in the college and are true to the best of our knowledge
- 3. We understand that in the event of information furnished above found to be partly or wholly untrue, the above students is liable to be disqualified for a period of two years

In case the student is a member of the team, then the whole tam is liable to be disqualified for two years.

UNIVERSITY OF MYSORE DEPARTMENT OF PHYSICAL EDUCATION, SPORTS PAVILION, MYOSRE – 570 005 ELIGIBILITY PROFORMA

Name of the Institution:		Event / Activity:
	Year	

Sl. No	Player's Name	Father Name	Blood Group	Roll No.	University Registration No.	Date of birth	University wh		Class in which studying	Date and year of admission to University	Date and year of admission to present class	Date and year of admission to present course	Duration of present course	No. of years of actual represent - ation of the University	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															

Certified that the above particulars are correct and true as per records available in the College

Signature
Physical Education Director / Sports Secretary

Principal