STATE/UT/UNIT - VIDYA BHARTI

NATIONAL SCHOOL GAMES 2026-27

Under The aegis of School Games Federation Of India

Certificate of Eligibility

Under-……..Boys/Girls

PHOTO with seal

1.	Name Of 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.	Fill Address Of School (In Block Letters)	
6.	School Phone No. With U-DISE Code No.	
7.	Last Year Registration No. S.G.F.I.	
8.	Date Of Birth (1) In Fig (2) In Words	
9.	Discipline/Game Name	
10.	Passport No. (If Available)	
11.	Age In Completed Years As On 31 December 2026	Year ☐ Month ☐ Days ☐
12.	Home Address In Full & Phone No./Mob. No.	
13.	Aadhar Card No.	
14.	Admission No. & Year	
15.	Date Of Joining The School/Addmission No.	
16.	Standard & Section Studying In This Year	
17.	Standard Studying At Last Year	
18.	Bank Details Of Participate (If Then Mention Mother/Father A/C No.)	Name - Name Of Bank - A/C No. - IFSC Code -
19.	Personal Identification Marks	1 2
20.	Singnature Of The Participant	

Certificate :-

1. Certifide 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.
3. Certificate that it is understood in the event of information furnished above found to be party of wholly untrue,the above students is liable to be disqualified for a period of two years in case the member of the team, then the participant is lible to be disqualified as a whole.

Signature of competent Authority of State/UT/UNIT Seal

Signature with seal Manager/Coach Post .....

Signature with seal The head of Institute/ principal/Head Master

21.	For office Use only	Name of Invigilator..... Name of Invigilator .....

अभिभावक अनुमति प्रमाण पत्र

मैं ..... पिता/पति .....

अपने पुत्र/पुत्री/पाल्या ..... कक्षा .....

वर्ग ..... संस्था का नाम .....

.....को प्रत्येक स्तर की खेल प्रतियोगिता में चयन होने पर (जिला स्तर, प्रांत, क्षेत्र एवं अखिल भारतीय, शासकीय राष्ट्रीय स्तर) भाग लेने की प्रदान करता/करती हूँ। मेरे पाल्य के द्वारा किसी भी प्रकार की अनुशासनहीनता नहीं की जायेगी।

अभिभावक के हस्ताक्षर

पता .....

.....

फोन नं.....

चिकित्सा प्रमाण पत्र

प्रमाणित किया जाता है कि भैया/बहिन .....

पिता ..... पूर्णरूप से स्वस्थ है, यह खेलकूद प्रतियोगिताओं में भाग ले सकता/सकती है।

चिकित्सक के हस्ताक्षर

सील