

# AMITY UNIVERSITY

## Amity School of Physical Education And Sports Sciences

### APPLICATION FORM FOR ADMISSION

(To be filled by applicants in his / her own handwriting)

COURSE APPLIED FOR: (Please tick on the opted course).

Affix your  
Photograph  
here

1.  **Bachelor of Physical Education  
(B.P.E-3 Years)**
2.  **P.G. Diploma in Sports Psychology  
(1 Year)**
3.  **Certificate Course in Sports Injury &  
Rehabilitation. (12 weekends).**
4.  **Certificate Course in Sports Management  
& Laws. (12 weekends).**
5.  **Certificate Course in Sports Coaching.  
(12 weekends).**  
 **Cricket**  **Basket Ball**  **Tennis**

Mr./Mrs. 

Last Name
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Middle Name
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First Name
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Date of Birth
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Place of Birth
----------------

Nationality
-------------

Category    General     OBC     SC     ST

#### Correspondence Address


Telephone Numbers (With STD)	
Resi:	
Fax	
E-mail	


Telephone Numbers (With STD)	
Resi:	
Fax	
E-mail	

## EDUCATIONAL QUALIFICATION

	Years Attended	Name of Board	Main Subject	Percent %
<b>Class 10/ High School</b>	From :			
	To :			
<b>Class 10+2 or Intermediate</b>	From :			
	To :			
<b>Graduation</b>	From :			
	To :			
<b>Others</b>	From :			
	To :			

**Note:** Enclose photocopies of all your certificates / testimonials.

**If employed give the following details:-**

a) Is the employment  whole time  Part Time  Adhoc

b) Name of the organization with complete address \_\_\_\_\_

c) No objection / leave certificate from the employer.

<p>Have you ever been suspended, dismissed or put on academic probation or warning at any school or college?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes" please explain _____</p> <p>_____</p> <p>_____</p>
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## ACHIEVEMENT IN GAMES & SPORTS

	Name of activity Game / Sports	Participation Level (Distt/Regional/State/ University/National/ International)	Position or responsibilities held (Referee/Official/Coach/ Manager/Office bearer)
1.			
2.			
3.			
4.			
5.			
6.			

## AWARDS

	Name	Received	For What
1.			
2.			
3.			
4.			

## FAMILY INFORMATION

Family Member	Name	Age	Qualification	Organization	Designation
Father					
Mother					
Spouse					
Brother					
Sister					

## ACCOMMODATION

Will you be requiring Hostel Accommodation?	Yes	No
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## ADDITIONAL INFORMATION (IF ANY)


I hereby certify that the information given in the Application Forms is complete and accurate. I understand and agree that misrepresentation or concealing of facts will liable to denial of admission, the cancellation of admission, or expulsion. I have read the rules and regulations carefully and do hereby consent to the Term and Conditions for the Admission.

- Note :**
- i) A medical fitness certificate is necessary for B.P.E. students while coming for physical fitness test comprising of **50 mts. run, Standing Broad Jump, Shuttle Run (4x10 mts.), Cricket Ball throw, 12 minutes run/ walk.**
  - ii) Admission test for Sports Psychology course will consist of theory paper only.
  - iii) No entrance test for Short Term Courses.

**Date :**

**Place:**

**Signature :**

**(Applicant)**