## **ELIGIBILITY FORM (**Haryana School Games 2025-26)

(The form would not be accepted if any column left unfilled)

Summary Sheet Sr. No.

Age Group		_Boys/Girls			
Venue	From	to	_Game/Event		
1. Name of Block / District _					$\neg$
2. Name of participant  (in BLOCK LETTERS)  3. Father's Name				Paste Latest Color Passport Size Photograph	ed
4. Mother's Name					
5. Home Address				Attested by School Head	
6. Contact No					
7. Date of Birth: (i) in Fig.					
(ii) in words					
8. Age in completed years as o	on 31 <sup>st</sup> December 2025:	:Year	N	1onth	Days
9. Bank Account No	IFS	C Code	Bank Name		
10. Name of the School:					
11. Admission No	12	. Date of Admission i	n School		
13. Present Class1	4. SRN of student		_Aadhar No		
15. Year of passing 5 <sup>th</sup>	8 <sup>th</sup>	10 <sup>th</sup> 16	. Percentage of	attendance:	
17. Two Prominent marks on t	he body: - (i)				
18. Signature of the Student: -					
19. Sports fund paid so far for t	he year 2025-26: -				
a) Strength of	students from 1st to	fund/amount	Rs.@5* =	Total Rs	
b) Strength of students from 6 <sup>th</sup> to		fund/amount	Rs.@10* =	Total Rs.	
d) Strength of students (i) 11	th to 12th Art	fund/amount	Rs.@60* =	Total Rs.	
(ii) 11 <sup>th</sup> to 12 <sup>th</sup> Com		fund/amount	Rs.@72* = 1	otal Rs	
(iii) 1	1 <sup>th</sup> to 12 <sup>th</sup> Science	fund/amount	Rs.@90* =	Total Rs	

Declaration: -1. Certified that the above participant is a regular student of this institution for the academic year 2025-26

- 2. Certified that I have personally verified the admission records maintained in the school and found correct.
- 3. I will be personally responsible if any attached documents or filled up particulars found duplicate or incorrect. In this situation department can take necessary action against me

Signature Team Incharge with Phone No.

Signature AEO / AEEO

Signature Head of School with seal