GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI DIRECTORATE OF EDUCATION: SPORTS BRANCH

CHHATRASAL STADIUM: MODEL TOWN: DELHI-110009

No. DE/41/2012/Sports/11055-11100

Dated: 30th November, 2012

To

The Heads of All Schools, Directorate of Education, Delhi / New Delhi

Sub:- Preliminary Selection trial cum-coaching camp for 58th National School Games - 2012 in Throw Ball (Under-14 years Boys & Girls) at Chhatrsal Stadium.

Sir / Madam,

Sports Branch, Directorate of Education, Govt. of NCT of Delhi intends to conduct preliminary selection trial cum-coaching camp for Delhi School Students in - Throw ball for (Under- 14 years) Boys & Girls. The details is as below:-

S.No	Game	Age Group	Venue	Date & Time	Eligibility	
1.	Throw Ball				Should be born on or after 1.1.1999 and Student of upto 8th Class	

The interested players should bring their entries on the spot i.e. on the competition day in enclosed prescribed performa at Chhatrsal Stadium along with age proof/ school identity card. The performa may be downloaded from this office website **www.edudel.nic.in**.

For further information, you may contact Sh. Basant Rana (Mob. No. 9811180311), Sh. Pawan Rana (Mob. No. 9899661314) & Sh. Amit Sehrawat (Mob. No. 9212771970) Throw Ball Coaches.

Final Selection of the players will be undertaken before the departure of the team.

The selected players will represent Delhi Team in 58th National School Games Throw ball Under-14 years (Boys & Girls) at Delhi w.e.f. 02.01.2013 to 08.01.2013.

Yours faithfully,

Additional Director of Education (Sports)

Copy forwarded to the :-

- 1. All RDE's
- 2. All District DDEs
- 3. All ADEs
- 4. All EOs
- 5. All SPEs
- 6. PS to Director of Education
- 7. Guard File
- 8. O.S. (IT) with the request to place the circular on website.

ENTRY FORM (THROW BALL)

(Age Group - 14 years) Boys & Girls

Name of player	:		
Father's Name	:		Recent colour photograph
Mother's Name	:		(To be attested by
Sex (Male / Female)	:		Head of the School)
Date of Birth (in figure)	;		
(In words)			
Class in which studying	i		
School Name	:		
Student's I.D.	:		
Permanent Address	Ē		
Contact No.	:		
I hereby certify that	the par	ticulars given above are true. Any false inform	ation will lead to
cancellation of my candid		steadard given above are true. They talse miorin	ation will lead to
(Signature of player)		
Dated :			

Name & Signature of the Head of the School with Seal.