GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI DIRECTORATE OF EDUCATION: SPORTS BRANCH CHHATRASAL STADIUM: MODEL TOWN: DELHI - 110009

No. F.DE/41/Sports/2017/ 19 089-19138 Dated: 14 [121] 7

Sub: - Preliminary selection trials-cum-coaching camp in Cricket in Under-17 years (Boys) category for Delhi school students.

This Directorate intends to select its Delhi state school Cricket team for participation in Under-17 National School Games for Boys to be held w.e.f 25.12.2017 to 30.12.2017 at Mumbai, Maharashtra. The players from Delhi will be shortlisted on anyone of the following parameters:

- Those players who have represented Delhi in U-17 National School Games held for academic year 2016-17.
- Any player who has represented Delhi state in Vijay Merchant Trophy in the year 2017-18.
- 3. Those batsmen who have scored 30 runs in any match of the Inter-Zonal U-17 tournament 2017-18.
- Those bowlers who took 03 wickets in any match of the Inter-Zonal U-17 tournament 2017-18.
- Thos All-Rounders who scored 25 runs and took 02 wickets in any match of the Inter-Zonal tournament 2017-18.

Based on the above parameters, the players, as per list attached, have been tentatively short listed by this office for consideration. If any other player who has not been included in the enclosed list and fulfils the above criteria, may report for participation in selection trials on 15.12.2017 at 9.00 A.M. at Bharat Nagar Sports Complex, New Delhi. The other eligible conditions of participating in selection trials are as follows:

- The student should have been a student of a Delhi School up to Class XII but not below Class VI in the academic Year 2016-2017.
- The cut off date of birth is 01-01-2001.

Note:

- 1. The students of Kendriya Vidyalaya are not eligible to participate in the selection trial.
- The copy of birth certificate of the student, issued by the Municipal Authority within one year of the birth of the child, is to be enclosed. If it has been issued after one year of the birth of the child, then it has to be supported with the orders of the Competent Authority e.g. SDM of the area concerned.
- In case of need, a student might have to undergo medical examination for age verification from the Govt. hospital.
- 4. All players should have mandatory AADHAAR Number.
- 5. Only one player is allowed in each weight category from one school. All the participants should be in their proper kit.

6. A player can participate in only one age category in that particular year.

DY. DIRECTOR OF EDN. (SPORTS)

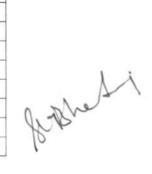
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- 9. PS to Secy. (Edn.)
- 10. PS to Director (Edn.)

1 1. OS (IT) with the request to place the circular on website.

Under-17 Probable Boys for Cricket for the session 2017-2018

S. No.	Name of the student (Master)	Zone
1.	Vedarsh	26
2.	Adiraj	26
3.	Akshay Kapoor	03
4.	Shubham	23
5.	Simaant Rawat	03
6.	Saurabh	28
7.	Ayush Kanojia	28
8.	Tanmay Sahni	26
9.	SikandarNitish Rawat	22
10.	Pratham Dogra	22
11.	Laxmi Narayan	01
12.	Abhinn Gilotra	11
13.	Rohan Rana	11
14.	Shivam Bhardwaj	20
15.	Prithvi Behl	20
16.	Honey Shokeen	25
17.	Shashank Gupta	20
18.	Shivam Gaur	20
19.	Md. Fayad	12
20.	Aryan Gaur	10
21.	Sameer	11
22.	Tejasvi	11
23.	Kunal	10
24.	Arpit Deswal	21
25.	Vinam	06
26.	Ramdev	15
27.	Ayush Saini	17
28.	Prithvi Anand	17
29.	Vishek Kumar	01
30.	Harshit	16
31.	Shreyans Mahi	21
32.	Shubham Bisht	21
33.	Sarthak Tyagi	18
34.	Manik Wadhawan	18
35.	Shekhar Bhardwaj	15
36.	Nitin Chowdhry	18
37.	Rahul Pander	18
38.	Abhishek Yadav	03
39.	Vaibhav Sharma	03
40.	Harsh Saini	20
41.	Yesh Kumar	09



ENTRY FORM

CRICKET (UNDER-19 YEARS) (BOYS)

Name of the School:			
Name of the player:			
Father's / Mother's Name:			Recent color photograph
Date of Birth (in figure):			(To be attested by
(in words):			Head of the School)
Class in which studying	ı		
School Admission No.	ŧ		
Student's I.D.	:		
Permanent Address	t		
Contact No.	:		
I hereby certify that to cancellation of my candida		n above are true. Any false informa	tion will lead to
		(Si	gnature of the player)
Verification by PET of the	School	Name & Signature of the Head of	the School with Seal

Name of the student	\$
Date of Birth:	

Details of educational qualifications:

S. No.	Class	Name and complete address of the school	Admn. No.	Year of study
1.	Nursery/LKG			
2.	KG/UKG			
3.	I			
4.	II		2	
5.	III			
6.	IV			
7.	V			
8.	VI			
9.	VII			
10.	VIII			
11.	IX			
12.	X			
13.	XI			
14.	XII			

(Signature of student/Parent)