



Reg. No:

National Institute of Sports Science

Advanced Coaches Course (Football) – 2024

Application Form

Photograph
(Passport
Size)

Full Name

Name with Initials
(Mr./Mrs./Miss)

Address
(Private)

Address (Official)

Contact No
(Private)

Contact No
(Official)

Email Address

Date of Birth

--	--	--	--	--	--	--	--	--	--

NIC

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Designation

Service Experience

Professional Qualifications (Sports)

	Course	Institute	Duration

Academic Qualification:

G.C.E. (O/L)

Subject	Grade	Subject	Grade
.....
.....
.....
.....
.....

G.C.E. (A/L)

Subject

Grade

.....
.....
.....
.....

Any other Qualifications:

.....
.....
.....

Achievements – As a Player (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

Achievements – As a Coach (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

Whether you are prepared to pay a course fee of Rs. 50,000/= if selected:

.....

I certify that the particulars given above are true and correct. I am aware that if the Particulars furnished by me are found to be false or incorrect, I am liable to be disqualified and removed from the course.

.....
Date

.....
Signature

For Government/Local Government/Corporation Employees only:

Director, National Institute of Sports Science:

**I recommend herewith the application of
Mr./Mrs./Miss.....**

**..
Employee of..... working
as.....**

**..
and I also agree to release him/her from work he/she holds for the period of the course in the event
of being selected.**

Address:

.....

.....

(Confirmation with the rubber frank)

Signature of the head of department

Date :

Name of the Certifying Officer:

Designation :

Reg. No:



National Institute of Sports Science
Physical Fitness Instructor Training Course
Application Form – 2024

Photograph
Stamp size

Name with initial
(Mr. / Mrs. / Miss)

Address (Private)

Address (Official)

Contact No
(Private)

Contact No
(Official)

Email Address

Date of birth

NIC

Designation

Service experience

Courses flowed in the field of sports (if any)

	Course	Institute	Duration

Educational Qualification: G.C.E. (O / L)

Subject	Grade	Subject	Grade

G.C.E (A / L)

Subject	Grade

Any other Qualifications:

I hereby certify that the information given above are true and accurate to the best of my knowledge.

.....
Date

.....
Signature



National Institute of Sports Science
Coaches Registration Programme
Certificate Course in Coaches Skills Development - 2024

Reg. No:

Application Form

Please indicate your field of Coaching

Photograph
(Passport Size)

Name with Initials
(Mr./Mrs./Miss)

Address (Private)

Address (Official)

Contact No
(Private)

Contact No
(Official)

Email Address

Date of Birth

--	--	--	--	--	--	--	--

NIC No

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Designation

Service Experience

Professional Qualifications (Sports)

	Course	Institute	Duration

Academic Qualification:

G.C.E. (O/L)

<i>Subject</i>	<i>Grade</i>	<i>Subject</i>	<i>Grade</i>
.....
.....
.....
.....
.....

G.C.E. (A/L)

Subject

Grade

.....
.....
.....
.....

Any other Qualifications:

.....
.....
.....
.....

Achievements – As a Player (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

Achievements – As a Coach (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

I hereby certify that the information given above are true and accurate to the best of my knowledge.

.....
Date

.....
Signature

Reg. No:



National Institute of Sports Science

Certificate Course in Sports Science (Level I) - 2024

Application Form

Photograph
(Passport
Size)

Please indicate your
field of Coaching

Full Name

Name with Initials
(Mr./Mrs./Miss)

Address
(Private)

Address (Official)

Contact No
(Private)

Contact No
(Official)

Email Address

Date of Birth

NIC

Designation

Service Experience

Professional Qualifications (Sports)

Course	Institute	Duration

Academic Qualification:

G.C.E. (O/L)

Subject	Grade	Subject	Grade
.....
.....
.....
.....
.....

G.C.E. (A/L)

Subject

Grade

.....
.....
.....
.....

Any other Qualifications:

.....
.....
.....

Achievements – As a Player (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

Achievements – As a Coach (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

.....

I certify that the particulars given above are true and correct. I am aware that if the Particulars furnished by me are found to be false or incorrect, I am liable to be disqualified and removed from the course.

.....
Date

.....
Signature

For Government/Local Government/Corporation Employees only:

Director, National Institute of Sports Science:

**I recommend herewith the application of Mr./Mrs./Miss
Employee of working as
and I also agree to release him/her from work he/she holds for the period of the course in the event of
being selected.**

Address:

.....

.....

(Confirmation with the rubber frank)

Signature of the head of department

Date :

Name of the Certifying Officer:

Designation :



Reg. No:

National Institute of Sports Science

Certificate Course in Sports Science (Level II) - 2024

Application Form

Photograph
(Passport
Size)

Please indicate your
field of Coaching

Full Name

Name with Initials
(Mr./Mrs./Miss)

Address
(Private)

Address (Official)

Contact No
(Private)

Contact No
(Official)

Email Address

Date of Birth

NIC

Designation

Service Experience

Professional Qualifications (Sports)

Course	Institute	Duration

Academic Qualification:

G.C.E. (O/L)

Subject	Grade	Subject	Grade
.....
.....
.....
.....
.....

G.C.E. (A/L)

Subject

Grade

.....
.....
.....
.....

Any other Qualifications:

.....
.....
.....

Achievements – As a Player (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

Achievements – As a Coach (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st ,2 nd ,3 rd or Participated)

.....

I certify that the particulars given above are true and correct. I am aware that if the Particulars furnished by me are found to be false or incorrect, I am liable to be disqualified and removed from the course.

.....
Date

.....
Signature

For Government/Local Government/Corporation Employees only:

Director, National Institute of Sports Science:

**I recommend herewith the application of Mr./Mrs./Miss
Employee of working as
and I also agree to release him/her from work he/she holds for the period of the course in the event of
being selected.**

Address:

.....

.....

(Confirmation with the rubber frank)

Signature of the head of department

Date :

Name of the Certifying Officer:

Designation :

Academic Qualification:
G.C.E. (O/L)

<i>Subject</i>	<i>Grade</i>	<i>Subject</i>	<i>Grade</i>
.....
.....
.....
.....
.....

G.C.E. (A/L)

<i>Subject</i>	<i>Grade</i>
.....
.....
.....
.....

Any other Qualifications:

.....

Achievements – As a Player (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st , 2 nd , 3 rd or Participated)

I hereby certify that the information given above are true and accurate to the best of my knowledge.

.....
 Date

.....
 Signature

**Academic Qualification:
G.C.E. (O/L)**

<i>Subject</i>	<i>Grade</i>	<i>Subject</i>	<i>Grade</i>
.....
.....
.....
.....
.....

Any other Qualifications:

.....

.....

.....

.....

Achievements – As a Player (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st , 2 nd , 3 rd or Participated)

I hereby certify that the information given above are true and accurate to the best of my knowledge.

.....
Date

.....
Signature

Academic Qualification:
G.C.E. (O/L)

<i>Subject</i>	<i>Grade</i>	<i>Subject</i>	<i>Grade</i>
.....
.....
.....
.....
.....

G.C.E. (A/L)

<i>Subject</i>	<i>Grade</i>
.....
.....
.....
.....

Any other Qualifications:

.....

.....

.....

.....

Achievements – As a Player (Please list down priority first)

No	Name of the Tournament	Level (International, National, Province, District)	Event	Effect (1 st , 2 nd , 3 rd or Participated)

I hereby certify that the information given above are true and accurate to the best of my knowledge.

.....
 Date

.....
 Signature