

Annexure 1
FORM – A
Application Form for Medal Winners

1. Application/ Registration No.: (For OFFICE USE)
2. Date of Application Submission: _____
3. Applicant Name: _____
4. PNR No. _____
5. Father's Name: _____ Mother's Name: _____
6. Date of Birth: _____ (DD/MM/YYYY)
7. Name of the Institution /Department/College
8. Course name _____ Current Class _____
9. Please tick the category you have represented
☐ Category A - International Level (Olympics, World Championships, Commonwealth Games, World University Games, Asian Games/ Championships)
☐ Category B - Khelo India University Games/ International
☐ Category C - All India Inter-University Games/ Nationals
☐ Category D - West Zone/ Ahswamedh/ State
10. Mention your Sports Achievement in the previous academic year 2024-25

Name of the Event	Name of the Tournament	Organizing Agency	Venue and Date	Category	Achievement	Remarks (FOR OFFICE USE)

Declaration:

I do hereby declare that all the information either mentioned above or in the enclosed documents is true & correct to the best of my knowledge and nothing has been concealed therein. I am very well aware of the fact that if any information is found to be false & incorrect then I will be liable to withdraw of scholarship or any benefits received by me will be liable to be ceased.

Place: _____

(Applicant Signature and Date)

Recommendation From the College Principal/Department Head/ Director

I hereby declare that Miss. _____ is a student of my institute/ college . I hereby recommend her name for the said scholarship.

(Signature of In-charge)

(Stamp & Signature of Principal)

Annexure 2

FORM – B

Application Form for Maharshi Karve Khel Ratna Award

1. Application/ Registration No.: (For OFFICE USE)
2. Date of Application Submission: _____
3. Applicant Name: _____
4. PNR No. _____
5. Father's Name: _____ Mother's Name: _____
6. Date of Birth: _____ (DD/MM/YYYY)
7. Name of the Institution /Department/College _____
8. Course name _____ Current Class _____
9. Please tick the category you have represented
 - ☐ Category A - International Level (Olympics, World Championships, Commonwealth Games, World University Games, Asian Games/ Championships)
 - ☐ Category B - Khelo India University Games/ International
 - ☐ Category C - All India Inter-University Games/ Nationals
 - ☐ Category D - West Zone/ Ahswamedh/ State
10. Mention your Sports Achievement in the previous 3 academic years 2022 - 23, 2023-24, 2024-25

Name of the Event	Name of the Tournament	Organizing Agency	Venue and Date	Category	Achievement	Remarks (FOR OFFICE USE)

Declaration:

I do hereby declare that all the information either mentioned above or in the enclosed documents is true & correct to the best of my knowledge and nothing has been concealed therein. I am very well aware of the fact that if any information is found to be false & incorrect then I will be liable to withdraw of scholarship or any benefits received by me will be liable to be ceased.

Place: _____

(Applicant Signature and Date)

Recommendation From the College Principal/Department Head/ Director

I hereby declare that Miss. _____ is a student of my institute/ college . I hereby recommend her name for the said scholarship.

(Signature of In-charge)

(Stamp & Signature of Principal)

Annexure 3
FORM – C
Application Form for Sports Mentorship Fee

1. Application/ Registration No.: (For OFFICE USE)
2. Date of Application Submission: _____
3. Applicant Name: _____
4. PNR No. _____
5. Father's Name: _____ Mother's Name: _____
6. Date of Birth: _____ (DD/MM/YYYY)
7. Name of the Institution /Department/College _____
8. Course name _____ Current Class _____
9. Mention your Sports Achievement in the previous 2 academic years. (District ranking, State Level and above)

Name of the Event	Name of the Tournament	Organizing Agency	Venue and Date	Achievement	Remarks (FOR OFFICE USE)

Declaration:

I do hereby declare that all the information either mentioned above or in the enclosed documents is true & correct to the best of my knowledge and nothing has been concealed therein. I am very well aware of the fact that if any information is found to be false & incorrect then I will be liable to withdraw of scholarship or any benefits received by me will be liable to be ceased.

Place: _____

(Applicant Signature and Date)

Recommendation From the College Principal/Department Head/ Director

I hereby declare that Miss. _____ is a student of my institute/ college . I hereby recommend her name for the said scholarship.

(Signature of In-charge)

(Stamp & Signature of Principal)