

**GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
DIRECTORATE OF EDUCATION: SPORTS BRANCH
CHHATRASAL STADIUM: MODEL TOWN, DELHI-110009**

No. DE- 41/Sports/2019/ 6977-7026 Dated:- 19/9/19
CIRCULAR

Sub: - Inter Zonal Football competition in Under-14 years (Boys) for Delhi school students.

Sports Branch, Directorate of Education, Govt. of NCT of Delhi intends to organize Inter Zonal Football competition in Under-14 years (Boys) for Delhi school students w.e.f. 10.10.2019 onwards at Chhatrasal Stadium, Model Town, Delhi-110009 as per eligibility given below:

Eligibility
Under-14 category student should be born on or after 01.01.2006
The player should be a student of up to Class XII but not less than Class VI in both the above categories.

The zonal teams should bring their entry in the enclosed prescribed proforma at Annexure-III, duly attested by the Convenor/Secretary/Supervisor at the above mentioned venue on 10.10.2019. The stamp of the concerned person(s) on the proforma should be clearly visible and legible. The stamp on the photo of the student should have been affixed in such a manner that the half of it should be on the photo and half on the proforma. The players will have to report in the proper playing kit and must bring their school ID proof with them. The schedule/fixture of the competition will be made available on our website shortly.

For any further enquiry, please contact Shri Sanjay Chaudhary (9278776738), Shri Shahid Akhtar (7827830986, 7503616611) and Shri Virender Singh (9818785843).

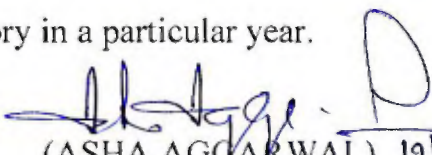
Note:

1. The students of Kendriya Vidyalaya are not eligible to participate in this tournament.
2. The copy of birth certificate of the student, issued by Municipal Authority, is to be mandatorily enclosed. The birth of the child should have been registered by the Municipal authority within one year of the birth of the student. In case it is not so, then the student will have to furnish details of his educational qualification from nursery onwards in the proforma enclosed at Annexure-II.

Contd...page 2...

(2)

3. In case of need, a student might have to undergo medical examination for age verification. No objection certificate should be obtained from parents to undergo to medical examination. The fees of medical test will be borne by concerned school/student. The test will be undertaken only in that hospital where the facility is available.
4. In case any discrepancy/malpractice related to date of birth is found, the concerned zone has to report the same to the DDE (Sports) with all the records related to admission in school. A thorough inquiry will be conducted and a coercive action, including lodging of F.I.R., will be initiated, if the player is found guilty of any wrong doing and the student will be debarred from the event for at least 3 years.
5. In case of any dispute, protest can be lodged with applicable protest fee, within one hour of completion of the match. No request would be allowed after the stipulated time.
6. It's a must for the protesting team to provide evidence against the particular player(s) in support of their claim.
7. Decision of the Technical Committee would be final.
8. The participating student must carry proof of his date of birth and original school ID card on the date of competition.
9. A student can participate in only one age category in a particular year.


(ASHA AGGARWAL) 19/9/19
Dy. Director of Education/(Sports)

Copy forwarded to:-

1. All Spl. DEs
2. All Addl. DEs
3. All RDEs
4. All DDEs
5. All ADEs
6. All EOs
7. All SPEs
8. All HOSs
9. PS to Secy. (Edn.)
10. PS to Director (Edn.)
11. Concerned person(s) whose name(s) is/are mentioned above.
12. OS (IT) with the request to place the circular on website.

ENTRY FORM FOR INTER ZONAL FOOTBALL TOURNAMENT-2019

Under-14 YEARS (BOYS)

ZONE NO.

S.No.	Name of the Student	D.OB.	Father's Name	Name of school & Class	Admission I.D No.	Photo
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						

I hereby certify that I have personally checked the documents deposited in our school relating to date of birth of the above students and found in order. Copies of the birth certificates are also checked and no discrepancies are noticed.

SECRETARY
WITH SEAL & TEL. NO.

CONVENER
WITH SEAL & TEL. NO.

SUPERVISOR
WITH SEAL & TEL. NO.

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	Whether represented DDCA/SGFI
1.	Nursery/LKG				
2.	KG/UKG				
3.	I				
4.	II				
5.	III				
6.	IV				
7.	V				
8.	VI				
9.	VII				
10.	VIII				
11.	IX				
12.	X				
13.	XI				
14.	XII				

It is to certify that the above given information is true to the best of my knowledge.

(Signature of student/Parent)

It is to certify that as per record available in school, the details of student namely _____ are as under:

Name of the student:

Father's Name:

D.O.B. :

Admitted in school from the session:

(Signature of the HoS with seal)