*Reg. No:*

# National Institute of Sports Science

## Certificate course in Sports Injury Management - 2023

### Student Registration Application

**Full Name (Mr./Mrs./Miss)**

**Name to be included in the certificate (Name with Initials)**

**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 |
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**Academic Qualification:**

**G.C.E. (O/L)**

| *Subject* | *Grade* | *Subject* | *Grade* |
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**G.C.E. (A/L)**

| *Subject* | *Grade* |
|---|---|
| ……. | …… |
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**Any other Qualifications**:

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

| No | Name of the Tournament | Level (International, National, Province, District) | Event | Effect (1st,2nd,3rd or Participated) |
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**Achievements – As a Coach** (Please list down priority first)

| No | Name of the Tournament | Level (International, National, Province, District) | Event | Effect (1st,2nd,3rd or Participated) |
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**I hereby certify that the information given above are true and accurate to the best of my knowledge.**

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Date Signature