

SCHOOL OF AUTHENTIC SHAOLIN KUNG-FU & TRADITIONAL YOGA



Regi No:- UDYAM-WB-10-0081394

REGISTERED WITH FIT INDIA AND KHELO INDIA

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FILL IN CAPITAL LETTERS

Examination Form



युवा कार्यक्रम और खेल मंत्रालय
MINISTRY OF
YOUTH AFFAIRS AND SPORTS
DEPARTMENT OF SPORTS

NAME _____

FATHER'S NAME _____ MOB _____

E-mail ID _____ DATE OF BIRTH _____

GENDER _____ HEIGHT _____ WEIGHT _____

RESIDENTIAL ADDRESS _____

BRANCH NAME & ADDRESS _____

PRESENT BELT _____ GRADING BELT _____

AADHAR NUMBER _____ REGISTRATION NUMBER _____

EXAM DATE _____ SIGNATURE OF STUDENT _____

Affix your
Passport Photo

MARK SHEET

SIGNATURE OF EXAMINER

SIGNATURE OF CHIEF INSTRUCTOR

SIGNATURE OF BRANCH INCHARGE

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