Anna University Sports Board Check List (Zonal Sports Coordinator)

SI.No	Details	Please verify and Tick
1.	Audited Statement of Account received from Local Sports Coordinator	
2.	Utilization Certificate	
3.	Balance amount (of the grant) returned (if any)	
4.	Cover containing unused Medals / Certificates	

Zonal Sports Secretary

Zonal Sports Coordinator

Name:

Name:

Anna University Sports Board Check List (Local Sports Coordinator)

Details	Please verify and Tick
Results furnished	
Zonal Combined Team	
List of Selection Committee Members furnished	
List of Teams Participated	
List of Referees furnished	
Details of Players furnished	
Details of Medals and Certificates furnished	
i. Number of Medals returned, if any:	
ii. Number of Certificates returned, if any:	
	Results furnished Zonal Combined Team List of Selection Committee Members furnished List of Teams Participated List of Referees furnished Details of Players furnished Details of Medals and Certificates furnished i. Number of Medals returned, if any:

Local Sports Secretary

Name:

Local Sports Coordinator

Name:

Results

Zone:

Game:

Dates of the Tournament: Venue:

Position	Name of the Institution
I	
11	
IV	

Local Sports Secretary

Local Sports Coordinator

Anna University Sports Board Selection for Inter-Zonal Tournaments Details of Players

(Zonal Combined Team)

Zone:

Date of the Tournament:

Game:

Venue:

SI.No.	Name of the Player	Register No.	Year/ Branch	Date of Birth	Name of the Institution	Signature
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

Local Sports Secretary

Local Sports Coordinator

Anna University Sports Board Details of Selection Committee Members

Zone:

Dates of the Tournament:

Game:

Venue:

SI.No	Name, Designation & Address	Signature
1		
'		
2		
3		
4		
5		

Local Sports Secretary

Local Sports Coordinator

Eligible for Rs. 650/- (Rupees Six Hundred and Fifty Only) as honorarium for the entire duration of ٠ the tournament (includes TA / DA)

List of Teams Participated

(Separate Sheet may be used and enclosed)

Zone:

Dates of the Tournament:

Game:

Venue:

Total No. of teams participated:

SI.No	College Name
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

Local Sports Secretary

Local Sports Coordinator

Zone:

Game:

Dates of the Tournament: Venue:

Fixtures

Local Sports Secretary

Local Sports Coordinator

Zone:

Dates of the Tournament:

Game:

Venue:

SI.No	Name, Designation & Address	Amount Rs.	Signature
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Local Sports Secretary

Local Sports Coordinator

Details of Players

(separate sheet may be used & enclosed)

(Format)

Zone:

Dates of the Tournament:

Game:

Venue:

Name of Institution:

SI.No.	Name of the Player	Register No.	Year/ Branch	Date of Birth	Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

Director of Physical Education (Manager)

Head of the Institution

Zone:

Game:

Name of Institution:

Zone:

Game:

Name of Institution:

Details of Players

Zone:

Game:

Name of Institution:

Details of Players

Zone:

Game:

Name of Institution:

Zone:

Game:

Dates of the Tournament: Venue:

Name of Institution:

AUDITED STATEMENT OF ACCOUNT

Name	of the Organizing	College	:			
Zone			:			
Game			:			
Sectio	n		:			
Date of	of Tournament		:			
Detail	s of grant received	from the Chai	rman, AUSB:			
DD	/ Cheque No:	Da	ite:		Amount:	
	ed that I have au organized by					
The details o	f expenditure are g	iven below:-				
1. Gr	ound Preparation &	& Hospitality		:Rs.		
2. Of	ficiating Charges			:Rs.		
3. Ho	spitality and Contir	ngencies		:Rs.		
4. Ho	norarium to Select	ion Committee	e Members	:Rs.		
			Total			
(Rupe	es					only)
Detail	s of balance amour	nt returned (if a	any):			
DD / 0	Cheque No:	Date:			Amount:	
Also c sources.	ertified that a sum	of Rs	/ Nil v	vas reo	ceived from othe	er
		Chartered Ac (Signature a				
Local Sports Se	ecretary				Local Sports C	oordinator
		Office seal wi	th date			

UTILIZATION CERTIFICATION

	Name of the Organizing College	:			
	Zone	:			
	Game	:			
	Section	:			
	Date of Tournament	:			
	Details of grant received from the	e Chairman, AUSB:			
	DD / Cheque No:	Date:		Amount:	
	Certified that the amount sanctio aments for the year 2017 - 18 or 	ganized by			
	The Statement of expenditure is	given below:-			
1.	Ground Preparation & Hospit	ality	:Rs.		
2.	Officiating Charges		:Rs.		
3.	Hospitality and Contingencies	3	:Rs.		
3.	Honorarium to Selection Corr	mittee Members	:Rs.		
	Total				
	(Rupees Details of balance amount return	ed (if any):			only)
	DD / Cheque No:	Date:		Amount:	
	DD / Cheque No.	Dale.			

Signature Local Sports Coordinator

Office seal with date



Anna University Sports Board ANNA UNIVERSITY, CHENNAI – 25 ELIGIBILITY PROFORMA OF PLAYERS

Candidate Signature should be on top of the Photo PHOTO to be attested by the Principal

1	Name of the Student	
2	Game	
3	Father's Name	
4	Mother's Name	
5	Name of the College	
6	Date of Birth & Age	
7	Address for Communication	
	Mobile : Landline :	
8	Permanent Residential Address	
9	Physical Director's Mobile Number	
10	Month & Year of Passing +2 /10 Examination	
11	Current Course of Study in Anna University	1. UG / PG : 2. Year : I / II / III / IV 3. Branch :
12	Anna University Examination Registration No.	
13	Details of UG Study (for PG students)	Name of UG Programme :College of Study:Year of Admission:Year of Completion:
14	Period of break of study (if any)	
15	Details of earlier representation in University team *	
16	Details of participation in National / International Tournaments *	
17	Size of Uniform ($\sqrt{1}$ the right size)	36 38 40 42 44 46

Enclosure :

- (i) Attested copy of the +2 mark sheet / Diploma Certificate
- (ii) Attested copy of the AU examination recent Hall Ticket / fee receipt for I year / recently received Semester Mark Sheet.
- (iii) Attested copy of the degree certificate in case of PG students.
- (iv) Attested copy of Form III / II / I *

Signature of the Student

Signature of the Principal