## **Sports Authority of Andhra Pradesh**

## **Details of Sports Persons**

Sports Person's id:	SKATING /	/					
Name (Full Name)						Recent Pa	ssport
						Photogr	aph
Father's Name							
Gender	MALE		FEMALE		]		
Date of Birth (DD/MM/YYYY format)							
Blood Group			AAD	HAR NO.			
Religion			CASTE			(SC/ST/BC/O	C)
Residential Address							
(Parmanent)							
Present Address							
	CTD Code		DUONE				
Contact No.	STD Code		PHONE				
Mandatory	MOBILE No.						
Mandatory	E-mail id						
Discipline	SPEED SKATING		ARTISTIC SKATING		ROLLER HOCKEY	INLINE HOCKEY	
	FREE STYLE		ROLLER DERBY		DOWN HILL	ROLLER ALPINE	
	SKATEBOAR DING		ROLLER SCOOTER		X - CROSS		
Identification marks	1						
	2						
Whether Employed	YES		NO		]		
If yes, Employee's Address							

## **Enclose the following:**

- 1. Copy of Aadhar
- 2. Date of Birth Certificate issued by School/College