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| ANDHRA UNIVERSITY **DEPARTMENT OF PHYSICAL EDUCATION AND SPORTS SCIENCES**  **C:\Documents and Settings\Syambabu\Desktop\AU Logos\Au Black Logo.jpg**   |  |  | | --- | --- | | **Prof.N.Vijay Mohan,** M.P.Ed., DNIS., NIS., PG.DSM, Ph.D.  Director & Head  Dept. of Physical Education & Sports Sciences  Andhra University  Visakhapatnam-530 003 (AP) | 0891-2844496  Cell: 9703831117  vijaymohansports@gmail.com  [ausportsvsp@gmail.com](mailto:ausportsvsp@gmail.com)  Web: andhrauniversity.edu.in | |

No.AUSB/ICGS/Circular-2/2018-19 Date: 11-09-2018

To

The Principals,

Affiliated Colleges of Andhra University,

Sir,

Sub:- Andhra University Inter-Collegiate-cum-University team selections 2018-19 – Reg.

&&&

The Andhra University Inter-Collegiate-cum-University team selections to the following events will be conducted on the dates and venues noted against the events. The players may report at the venue with the necessary eligibility along with passport size photograph duly signed by the Principal (Facsimile not allowed) on the reverse side on the photograph and pinned to the eligibility Performa. Students born on or after **01-07-1993** are eligible. The players should report at 8.00 AM to the Organizing Secretary with eligibility.

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No.** | **EVENT** | **DATE** | **VENUE** |
| 01. | Kho-Kho (Men & Women)  Inter-Collegiate-cum-Univ. Selections | 26-09-2018 | M.R. College (A), Stadium Vizianagaram  Contact No. 9440255917 & 6281769679 |
| 02. | Chess (Men)  Inter-Collegiate-cum-Univ. Selections | 28-09-2018 | Samata College, MVP Colony, Visakhapatnam  Contact: 9849207429 |
| 03. | Chess (Women)  Inter-Collegiate-cum-Univ. Selections | 29-09-2018 | Samata College, MVP Colony, Visakhapatnam  Contact: 9849207429 |

**Note: Enclosed eligibility pro-forma**

Thanking you,

Yours sincerely,



**(N.VIJAY MOHAN)**

DIRECTOR OF PHYSICAL EDUCATOIN

AND SECRETARY SPORTS BOARD

Copy to the Secretary to the Vice-Chancellor, AU

Copy to the P.A. to Registrar, A.U. Visakhapatnam

Copy to all the Principals of Campus Colleges,

Copy to all the Lecturers in Physical Education/Physical Directors

Copy to all the Heads of the Departments and Chief Wardens, A.U. Colleges

With a request to display on **NOTICE Board.**

**ELIGIBILITY PROFORMA**

**Name of the College:**

Affix

Latest pass port size photo

|  |  |  |  |
| --- | --- | --- | --- |
| 1) | Full Name (in Block letters) | : |  |
| 2) | Father’s Name | : |  |
| 3) | Mother’s Name | : |  |
| 4) | College in which Studying | : |  |
| 5) | Date of Birth (enclose Xerox copy of SSC or its equivalent pass certificate) | : |  |
| 6) | Date & Year of passing qualifying examination (enclose Xerox copy of the Intermediate or its equivalent pass certificate) | : |  |
| 7) | Present Class | : |  |
| 8) | Name of the Present Course | : |  |
| 9) | Duration of the Course | : |  |
| 10) | Date & Year of first admission into University | : |  |
| 11) | Date & Year of first admission into present course | : |  |
| 12) | Number of years of previous participation (Inter-University) while pursuing Graduate Course | : |  |
| 13) | Number of years of previous participation (Inter-University) while pursuing Post Graduate course | : |  |
| 14) | Cell No. | : |  |
|  |  |  |  |

**Signature of the Principal Signature of the Lecturer in Physical Edn.**