

**IMPORTANT:** Make sure that you possess requisite qualifications for admission to the course you intend to join. Incomplete applications and those unaccompanied by attested copies of certificates/conduct certificate will summarily be rejected.

INTERNET COPY

**LAKSHMIBAI NATIONAL COLLEGE OF PHYSICAL EDUCATION  
THIRUVANANTHAPURAM**

**APPLICATION FOR ADMISSION TO BPEd / MPE / M.Phil / PGDHFM 2013-2014**

Last Date for Receipt of Application is **08.06.2013** for PG courses

**12.06.2013** for BPEd course

Affix  
Stamp size  
Photograph

Course applied for.....

Choice of Centre (only for BPEd) .....

(Testing centers: 1.LNCPE, Tvpm, 2. SAI- NSEC, Imphal, 3.SAI Northern Centre, Chandigarh 4. SAI NSEC, Kolkata, 5. SAI-NSWC, Gandhinagar)

1. Name (In capital letters)

2. Father's Name (If not alive, prefix late)

3. Father's occupation

4. Mother's Name

5. Mother's occupation

6. Guardian's Name (If father not alive)

7. Sex  Male  Female

8. Address for communication

PIN

9. Telephone No. (Res.) ..... (Contact) .....

10. State of Domicile .....

11. Nationality .....

12. Date of Birth (Enclose certificate) dd   mm   yy

In Words .....

13. Are you eligible for age relaxation?  Yes  No

If Yes, state the reason (refer eligibility conditions in the prospectus) .....

14. Religion .....

15. Are you eligible to be considered under **SC/ST** reservation  Yes  No

(If Yes, tick the appropriate word & write the **sub caste** & attach certificate)

**SC** .....

**ST** .....

16. Are you eligible to be considered under **OBC**  Yes  No

(If Yes, write the **sub caste** & attach certificates as given in the College website)

.....

17. Marital Status  Married  Unmarried

### 18.a. Educational Qualifications

Sl. No.	Examination Passed	Reg. No.	Name of University/Board	Year of Passing	Total Marks	Marks Obtained	% of marks Obtained
1	Matric / SSLC						
2	PDC/+2/Sr.Sec/ VHSC/CPEd						
3	BA/BSc/BCom/ BPE/BPEd/DPEd						
4	MPE/MPEd						

### b. Sports achievement (Mention only **the highest** achievement)

Particulars (level) of participation	Game/ Sport	Name of University / State represented	Year	Position Obtained

**DECLARATION BY THE CANDIDATE**

I am prepared to come on my own expenses for admission tests on the date mentioned in the prospectus or as intimated to me.

In case I am admitted to the college, I agree to work and study diligently and conform to the rules and regulations in force in the college, or which may hereafter be framed. Further, I take it on oath that I shall do nothing inside and outside the college that will interfere with its orderly governance and discipline or cause any reflection on the reputation of the college, the college authorities being the sole and final judge of such acts of commission and omission. I have not been rusticated from any educational institution nor have I been awarded any punishment for criminal offence including ragging.

I certify that all information given above and in the enclosures to this application is true to the best of my knowledge and that no information has been withheld.

Date:

Signature of the candidate



**UNDERTAKING BY THE PARENT/GUARDIAN**

I, .....Father /Mother/Guardian  
of applicant.....hereby  
undertake to maintain the applicant during his/her studies at the college and shall be responsible for his/her liabilities. I also stand surety for his/her good conduct.

Place.....

Signature.....

Date.....

Name.....

**TEST IN GAME/SPORT:** Select **ONE** Game/Sport of your choice for admission test

SL.NO	Game/Sport*	Tick √	SL.NO	Game/Sport	Tick √	SL.NO	Game/Sport	Tick √
1	Basketball		7	Hockey		13	Table Tennis	
2	Boxing		8	Kabaddi		14	Taekwondo	
3	Cricket		9	Kho-kho		15	Tennis	
4	Football		10	Shuttle Badminton		16	Track & Field	
5	Gymnastics		11	Softball		17	Volleyball	
6	Handball		12	Swimming		18	Wrestling	

**\*The College reserves the right to delete any Game/Sport from the list on administrative consideration.**

**Notes:**

- I. Applications received at the college after the last date of submission will not be considered.
- II. Applications must be accompanied by the following documents. (Tick the ones you have enclosed)
  1. Date of Birth Certificate as entered in school records. (**Attested Xerox copy**)
  2. Character certificate from the Head of the Institution last attended. (**Attested Xerox copy**)
  3. Evidence of Educational qualifications and sports achievements. (**Attested Xerox copies**)
  4. Medical Certificate (**in the prescribed form**)
  5. Two photographs – a stamp size photograph pasted on the application form and a passport size photograph on the identity card- both duly attested by the Head of Institution or a person in local/ central government holding an elected post.
  6. Admission test call card (**self addressed and duly stamped**) and Identity Card.
  7. Attested copies of Eligibility Certificate from Authority Concerned for consideration under mandatory reservation.

**For**

**(a) SC/ST (Community Certificate from authorities empowered)**

(Download the form from College Website [www.lncpe.gov.in](http://www.lncpe.gov.in))

**(b) OBC (Community and Income certificate from authorities empowered)**

(Download the form from College Website [www.lncpe.gov.in](http://www.lncpe.gov.in))

## MEDICAL CERTIFICATE

(To be certified by a Registered Medical Practitioner)

Name..... Sex.....

Height (in centimeters)..... Weight (in Kg.).....

Physical appearance and Musculature.....

Robust/Average/Weak.....

Previous fracture, joint injuries (give details).....

B.P.....

C.N.S .....

C.V.S .....

Respiratory System .....

Liver .....

Spleen .....

Hernia sites .....

Throat .....

Ears Perforation/discharge/any other (Mention)

.....Hearing.....

Eyes..... Vision with glasses.....

(Colour Blind Partial/Complete)

Any abnormality, physical defect or disability (such as Kyphosis, Scoliosis, Knock Knees, Flat Feet, Obesity).....

History of Epilepsy, Asthma, T.B., Allergy, etc.

Sensitivity to drugs, if any.....

I certify that I have this day carefully examined (name).....

and recorded my observations as given above. **I am satisfied that she/he is FIT/NOT FIT to undergo training in Physical Education which will involve strenuous physical activities and competitive games.**

**Note:** As per rule each candidate will be medically examined by the College Medical officer also, whose decision in this matter will be final and binding.

Date:.....

Signature .....

Name .....

Registration No.....

Address .....

.....

Signature of the candidate

## IDENTITY CARD

**ADMISSION TO BPEd /MPE/ PGDHFM/ M.Phil**

**Admission Test Centre:** \_\_\_\_\_

**CALL NO :**.....(*To be filled in by the office*)

**NAME:**.....

*Affix a passport  
size  
Photograph*

Signature of the Candidate

Signature of Co-ordinator

## AAHPER FITNESS TEST SCORE CARD

Item	Performance	Tester's Initials
Pull-ups/Flexed-arm hang		
Sit Ups		
Shuttle Run		
Standing Broad Jump		
50 yard run		
600 yard run		

**LAKSHMIBAI NATIONAL COLLEGE OF PHYSICAL EDUCATION  
KARIAVATTOM, THIRUVANANTHAPURAM  
ADMISSION TEST CALL CARD**

Call No.....

Date.....

1. Reference to your application for admission, please report at \_\_\_\_\_

\_\_\_\_\_ for admission test as follows:

BPEd    20.06.2013    6 a.m     MPE    15.06.2013    7 a.m

PGDHFM    15.06.2013    7 a.m

**Bring sports kit and all your certificates in original.** No TA/DA will be paid. The following documents, which have not been enclosed along with the application, must be produced at the time of admission test:

- a.
- b.

2. It is regretted that you are not eligible to be called for admission tests for the following reasons:

.....  
.....  
.....

*Affix  
Sufficient  
Postage*

To

**Principal**

.....  
.....  
.....  
.....