

# East Bengal Football School of Excellence



SINCE 1920

## APPLICATION FORM PERSONAL PARTICULARS

Photograph  
of  
Candidate

1. Name of candidate (In Capital Letter) \_\_\_\_\_

2. Father's/ Guardian's name: \_\_\_\_\_

3. Fathers Profession : \_\_\_\_\_

4. Mothers Name : \_\_\_\_\_

5. Mothers Profession : \_\_\_\_\_

6. Languages known: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

7. Permanent Address: \_\_\_\_\_

Email: \_\_\_\_\_ Contact : \_\_\_\_\_

8. Date of birth: \_\_\_\_\_ (Please attach certificate)

9. Educational background: \_\_\_\_\_

(Please attach a certificate from the school authorities certifying age/class)

FOOTBALL PARTICULARS: Positions:

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_

Height: \_\_\_\_\_ Feet \_\_\_\_\_ Inches \_\_\_\_\_ Weight: \_\_\_\_\_ Kgs. Blood Group: \_\_\_\_\_

History of medical illness: \_\_\_\_\_

Any known congenital deformity: \_\_\_\_\_

Declaration : I , ..... (Parent / Guardian's name) hereby certify that the above Information is authentic and true to the best of my knowledge. In case any information is not found true, my ward will be disqualified.

I would make myself available for the Junior East Bengal Team (Based on selection).

**Disclaimer** : I understand that football is a body contact game and training process might involve injuries. We would expect the school authorities to administer basic First-Aid and have a doctor on call if required. Beyond which the parent/guardian would take the responsibility of the candidate once they are informed about the condition.

\_\_\_\_\_  
(Candidate's Signature)

\_\_\_\_\_  
(Guardian's/Parent's Signature)

Filled up form to be submitted at admission office (club tent) along with a non refundable amount of Rs. 200

For any info call us :- East Bengal Club : 033-22484642 or call Mr. Ratan Saha : 9007694244 / 9073735296

Mr. Shibendra Dutta Bhowmick : 9088123829