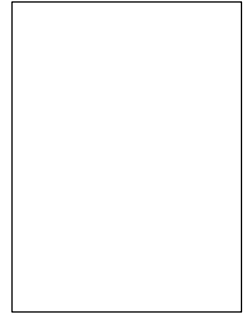




**SPECIMEN APPLICATION FORM**

**National Institute of Sports Science  
DIPLOMA IN SPORTS – 2025/2026**



Passport size photo

1. (I) Full Name: - Mr/Mrs/Miss .....

(II) Name with Initials: - .....

(III) Full Name (In English Block Capitals) :


(IV) National Identity Card No:

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2. Address :-

(I) Private :- .....

(II) Official :- .....

(III) WhatsApp no.:-.....

(III)Telephone Official : ..... Telephone Private :.....

3. Date of Birth :- Year 

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 Month 

--	--

 Day 

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Age on 28/03/2025 :- Years 

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 Months 

--	--

 Days 

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4. State whether a Citizen of Sri Lanka: .....

(by descent or by registration) :- .....

5. (I) Sex :- .....

(II) Marital Status :-.....

6. Whether you are employed or not :- .....

(I) Post : - .....

(II) Duration of the service.:-.....

(III) Place of Employment: -  
.....

7. Educational Qualifications: -

(i) G.C.E. (Ordinary Level)

Year 

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 Exam No - .....

Subjects	Grade	Subjects	Grade

(II) G.C.E. (Advanced Level)

Year 

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 Exam No - .....

Subjects	Grade

(III) Other Education Qualification (Highest Exam/Degree)

Year 

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 Exam No - .....

Subjects	Grade

8. Achievements in Sports :- ( Please include your Certificates of highest achievements and special abilities – Please attach the photo copies)

1. Performance over 16 years of age at National School Competitions

.....  
.....

2. Performance at National Sports Festival District/Provincial/National

.....  
.....

3. Performance at National Competitions conducted by National Sports Associations

.....  
.....

4. Participation in International Sports Competitions

.....  
.....

9. (I) According to the gazette notification, please state, under which qualification category of 1.1 that you are eligible to apply for the course.

a	b	c	d	e

(II) Give details of qualifications relevant to the category stated above:

.....  
.....

10. Any other special remarks:-

.....

12. Whether you are prepared to pay a course fee of Rs.60000/= if selected :-

.....

I certify that the particulars given above are true and correct. I am aware that if the Particulars furnished by me are found to be false or incorrect, I am liable to be disqualified and removed from the course.

Date: .....

.....

Applicant's Signature

**For Government / Local Government / Corporation Employees only :**

Director,  
National Institute of Sports Science:

I recommend herewith the application of Mr./Mrs./Miss.....  
employee of ..... working as.....  
And I also agree to release him / her from the post he/ she hold for the period of the course in the event of being selected.

Address:

.....

.....

Signature of the Certifying Officer  
(Confirmation with the rubber frank)

Date: .....

Name of the Certifying Officer :.....

Designation :.....

