



**GOVERNMENT OF TRIPURA  
DIRECTORATE OF YOUTH AFFAIRS & SPORTS**

**Application Format for engagement of Contractual General Physician/  
Physiotherapist/Young Professional/Masseur for Khelo India State Centre of  
Excellence, DDSSC, Agartala.**

*Recent  
(Passport size,  
Photograph du.  
signed*

**To  
The Director  
Youth Affairs & Sports  
Govt. of Tripura  
Agartala, West Tripura**

1	Post applied for	
2	Name of Candidate	
3	Nationality	
4	Father's Name	
5	Mother's Name	
6	Date of Birth	
7	Whether UR/SC/ST/OBC	
8	Gender – Male/Female/Other	
9	Mailing Address:	
	House No. & Street	
	Area	
	City / Town	
	District	
	Pin Code	
10	Telephone No.	
11	(WhatsApp) Mobile No.	
12	Email ID	

*(self attested copy of certificates to be enclosed)*

13	<b>Qualification:</b>				
	Sl. No.	Exam Passed	University/College/Board/Institute	Year of Passing	Percentage of Marks
	1				
	2				
	3				
	4				
	5				

*(self attested copy of certificates to be enclosed)*

<b>14</b>	Registration No. of Medical Council/State	
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*(self attested copy of certificates to be enclosed)*

<b>15 Experience:</b>						
Sl. No.	Organization	Post held	Period		Last Pay	Nature of duties
			From	To		

*(self attested copy of certificates to be enclosed)*

**16. Sports Participation:**

**(A) International Level**

S. No.	Event	Name of the Competition, date & Venue	Position

*(self attested copy of certificates to be enclosed)*

**(B) National Level**

S. No.	Event	Name of the Competition, date & Venue	Position

*(self attested copy of certificates to be enclosed)*

**Declaration:**

I hereby declare that all particulars furnished in this application are true and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect or not satisfying the prescribed eligibility criteria for the post applied for, my candidature is liable to be cancelled / rejected at any stage of selection.

Place:

Signature:

Date:

Name: