

परिशिष्ट - ब

FORM-3

(For representing a District in Maharashtra in a State Competition in one of the Recognized Games / Sports.)

Certificate to a meritorious sportsman for employment to Group C/D service Under the State Government.

Single Games State Association of Maharashtra in the game of

Certified that Shri/Smt./Kumari.....
Son/Wife/Daughter of Shri.....
Resident of (complete address)

Represented District in the game/event of..... in the
State Competition / Tournament held at
From To

The position obtained by the individual/ team in the above said Competition /
Tournament was.....

This Certificate is being given on the basis of record available in the office of
The authentic / recognized State Association of Maharashtra.

Place:

Date:

Signature:

Name:

Designation

Name of the federation/ National

Association

Address.....

Seal.....

Note: - This certificate will be valid only when signed personally by the Secretary of
The authentic/ recognized State Association.

(Authentic /Recognized State Association means, association which is affiliated to
Indian Olympic Federation a unit of Indian Olympic Association and Maharashtra
Olympic Association)

Place:

Date:

Signature:

Name:

Designation: Deputy Director,
Sports and Youth Services,
Maharashtra State,

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