2017-18

POWER SHOTOKAN KARATE ASSOCIATION INDIA

Shotokan Karate Sports Club, Tirupur District
Affiliated to : LEE STYLE Shotokan Karate Do All India Organisation

STATE LEVEL SCHOOL TOURNAMENT UDUMALPET

Certificate

This is to certify that Mr./Miss./Mrs. ..... KEERTHIKA [illegible] R.S .....

has participated in the **STATE LEVEL SCHOOL TOURNAMENT** 25.10.2017

held at **SRI VANI MAHAL, UDUMALPET, TAMIL NADU, INDIA.**

He / she Has been awarded in the ..... I ..... *place in the*

individual kumite / Kate, Team Kumited, Team Kate, Male / Female ..... KUMITE .....

event in colour Belt / Black Belt Category.

Chief Referee
Shihan S. NATARAJAN
6th Dan Black Belt

Referee

Tournament Organised by
Sensei. S.SAMINATHAN
3rd Dan Black Belt

பாரதியார் பல்கலைக்கழகம்
BHARATHIAR UNIVERSITY
COIMBATORE - 641 046, TAMILNADU, INDIA.

State University | Re-accredited with "A" Grade by NAAC | Ranked 14th among Indian Universities by MHRD-NIRF

Ref. No. DPE/BU/IUT/2017-2018/179 dt. 26.12.2017

From

Dr Dr.K.Murugavel
Professor & Director
Department of Physical Education
Bharathiar University
Coimbatore - 641 046.

N.G.M. COLLEGE
POLLACHI
01 JAN 2018
S.No. :.....

To

The Principal
NGM College
Pollachi - 642001

Sir,/Madam,

The following students of your college has/have been selected to participate in the South Zone inter University Cricket (M) in Tournament for the year 2017-2018.

1. Ragupath.C. (B.Sc Che)

I therefore, request you to accord him/her then necessary permission, attendance and facilities for attending the Coaching Camp and the Inter-University Tournament as mentioned here under:

01. Date on which Player(S) should report	:	27.12.2017 **2.00 .pm**
02. Venue of the Coaching Camp	:	**Bharathiar University, Coimbatore**
03. Date on which the team leaves Coimbatore for Participation in the All India Inter University Tournament	:	1.1.2018
04. Duration of the South Zone /All India Tournament to be **held at**	:	**3.1.2018 to 12.1.2018 Andhra University Visakhapatnam.**

TA & DA for the participation in the Inter University Tournament will be met by the Bharathiar University.

One Pass-Port Size & Stamp Size photo copies (inscribing their names legible on the reverse) of each player may be sent to this office immediately for purpose of the identify certificate to be issued by this office. The Eligibility Certificate of the players (with their father name) Selected may please be sent immediately, if not sent already.

PROFESSOR AND DIRECTOR

Copy to: i) The Registrar, Bharathiar University.

ii) The Director of Physical Education
NGM College
Pollachi - 642001.

பாரதியார் பல்கலைக்கழகம்
BHARATHIAR UNIVERSITY
COIMBATORE - 641 046, TAMILNADU, INDIA.

State University | Re-accredited with "A" Grade by NAAC | Ranked 14th among Indian Universities by MHRD-NIRF

Ref. No. DPE/BU/IUT/2017-2018/91 dt. 23.9.2017

From

Dr Dr.K.Murugavel
Professor & Director
Department of Physical Education
Bharathiar University
Coimbatore - 641 046.

To

The Principal
NGM College
Pollachi

Sir,/Madam,

The following students of your college has/have been selected to participate in the South Zone inter University Volleyball (W) in Tournament for the year 2017-2018

1.Anugraha.T.S. (I.B.Com)

I therefore, request you to accord him/her then necessary permission, attendance and facilities for attending the Coaching Camp and the Inter-University Tournament as mentioned here under:

01. Date on which Player(S) should report	:	13.10.2017 **2.00 .pm**
02. Venue of the Coaching Camp	:	**Bharathiar University, Coimbatore**
03. Date on which the team leaves Coimbatore for Participation in the All India Inter University Tournament	:	20.10.2017
04. Duration of the South Zone /All India Tournament to be **held at**	:	**20.10.2017 to 25.10.2017 Kannur University**

TA & DA for the participation in the Inter University Tournament will be met by the Bharathiar University.

One Pass-Port Size & Stamp Size photo copies (inscribing their names legible on the reverse) of each player may be sent to this office immediately for purpose of the identify certificate to be issued by this office. The Eligibility Certificate of the players (with their father name) Selected may please be sent immediately, if not sent already.

PROFESSOR AND DIRECTOR

Copy to: i) The Registrar, Bharathiar University.

ii) The Director of Physical Education
NGM College
Pollachi

பாரதியார் பல்கலைக்கழகம்
BHARATHIAR UNIVERSITY
COIMBATORE - 641 046, TAMILNADU, INDIA.

State University | Re-accredited with "A" Grade by NAAC | Ranked 14th among Indian Universities by MHRD-NIRF

Ref. No. DPE/BU/IUT/2017-2018 /167 dt. 14.12.2017

From

Dr Dr.K.Murugavel
Professor & Director
Department of Physical Education
Bharathiar University
Coimbatore - 641 046.

To

The Principal
NGM College
Pollachi

Sir,/Madam,

The following students of your college has/have been selected to participate in the All India inter University Ball Badminton (M) in Tournament for the year 2017-2018.

1. Muthuvel. G. (PGDCA)

I therefore, request you to accord him/her then necessary permission, attendance and facilities for attending the Coaching Camp and the Inter-University Tournament as mentioned here under:

01. Date on which Player(S) should report	:	19.12.2017 **10.30.am**
02. Venue of the Coaching Camp	:	Sree Saraswathi Thiagaraja College, Pollachi
03. Date on which the team leaves Coimbatore for Participation in the All India Inter University Tournament	:	25.12.2017
04. Duration of the South Zone /All India Tournament to be **held at**	:	**27.12.2017 to 30.12.2017 Yogi Vemana University Kadapa(AP)**

TA & DA for the participation in the Inter University Tournament will be met by the Bharathiar University.

One Pass-Port Size & Stamp Size photo copies (inscribing their names legible on the reverse) of each player may be sent to this office immediately for purpose of the identify certificate to be issued by this office. The Eligibility Certificate of the players (with their father name) Selected may please be sent immediately, if not sent already.

PROFESSOR AND DIRECTOR

Copy to: i) The Registrar, Bharathiar University.

ii) The Director of Physical Education
NGM College,
Pollachi .

பாரதியார் பல்கலைக்கழகம்
BHARATHIAR UNIVERSITY
COIMBATORE - 641 046, TAMILNADU, INDIA.

State University | Re-accredited with "A" Grade by NAAC | Ranked 14th among Indian Universities by MHRD-NIRF

Ref. No. DPE/BU/IUT/2017-2018 /9 dt. 17.1.2018

From

Dr Dr.K.Murugavel
Professor & Director
Department of Physical Education
Bharathiar University

N.G.M. COLLEGE
POLLACHI
19 JAN 2018
S.No. .....

To

The Principal
NGM College
Pollachi

Sir,/Madam,

The following students of your college has/have been selected to participate in the All India inter University Ball Badminton (W) in Tournament for the year 2017-2018.

1.Hemamalini.S. (I B.Sc Maths)

I therefore, request you to accord him/her then necessary permission, attendance and facilities for attending the Coaching Camp and the Inter-University Tournament as mentioned here under:

01. Date on which Player(S) should report	:	29.1.2018 **11.30.am**
02. Venue of the Coaching Camp	:	**Bharathiar University**
03. Date on which the team leaves Coimbatore for Participation in the All India Inter University Tournament	:	4.2.2018
04. Duration of the South Zone /All India Tournament to be **held at**	:	**5.2.2018 to 9.2.2018 Dravidian University Kuppam (AP)**

TA & DA for the participation in the Inter University Tournament will be met by the Bharathiar University.

One Pass-Port Size & Stamp Size photo copies (inscribing their names legible on the reverse) of each player may be sent to this office immediately for purpose of the identify certificate to be issued by this office. The Eligibility Certificate of the players (with their father name) Selected may please be sent immediately, if not sent already.

PROFESSOR AND DIRECTOR

Copy to: i) The Registrar, Bharathiar University.

ii) The Director of Physical Education
NGM College
Pollachi