

Grams: "TECHNOLOGY"
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JAWAHARLAL NEHRU TECHNOLOGICAL UNIVERSITY KAKINADA
KAKINADA – 533 003, ANDHRA PRADESH, INDIA
(Established by AP Government Act No. 30 of 2008)

Lr. No. JNTUK/UGSA/USC/GB Meeting /2018

Dt: 16-08-2018

Dr. V.V. Subbarao
B.Tech, M.E., Ph.D.
REGISTRAR

To
The Principals
Constituent / Affiliated Colleges
JNTUK Kakinada

Sir,

Sub: - JNTUK- UGSA - USC – Faculty of Physical Education - General Body Meeting -
Regarding.

I, by the direction of Hon'ble Vice – Chancellor wish to inform you that, the General
Body meeting of the Faculty of Physical Education will be held on **21-08-2018 (Tuesday) at**
11:00 am in the Senate Hall, JNTUK Kakinada.

All the Faculty of Physical Education are requested to attend the meeting without fail, to
share their ideas to conduct sports and games during 2018-19, more effectively.

Our Hon'ble Vice – Chancellor (i/c) Prof. S. Ramakrishna Rao garu will grace the occasion.

Thanking you,

Use
REGISTRAR
REGISTRAR
J.N.T. University Kakinada
KAKINADA-533 003

Copy to Secretary to Hon'ble Vice-Chancellor, JNTUK Kakinada
Copy to PA to Rector, JNTUK Kakinada
Copy to PA to Registrar, JNTUK Kakinada
Copy to PA to OSD, JNTUK Kakinada
Copy to Director, University Games & Sports Administration, JNTUK Kakinada
Copy to Secretary, Sports Council, JNTUK Kakinada
Copy to Secretary, Inter Collegiate Tournaments, JNTUK Kakinada



JAWAHARALAL NEHRU TECHNOLOGICAL UNIVERSITY KAKINADA
UNIVERSITY SPORTS COUNCIL
KAKINADA – 533 003.

PROFICIENCY PERFORMA FOR FACULTY OF PHYSICAL EDUCATION WORKING IN THE
AFFILIATED COLLEGES

1. Name (In Block Letters) :
(Phone Number & email)
2. Date of Birth :
3. Designation :
4. Date of Appointment :
5. College Name and address :
(College Phone No and email)
6. Education Qualifications :
7. Professional Qualification (*M.P.Ed/M.Phil/Ph.D/NIS*) :
8. Specialized In (Sport/Game) :
9. Level of Participation in the specialization :
(A. Inter-National, / B. National / C. Inter-University
D. Inter-Collegiate (UG/PG) / E. Inter-District)
10. Coaching Experience :
11. Previous Experience As :
(Coach / Manager / Selection Committee Member)
12. Level of Officiating Test Passed :

Signature of the Candidate

Principal

Note: Please certify that above furnished information is correct with a Gazetted Officer (please enclose Relevant certificates). Based on the information your candidature for Coach/Manager for Inter-University Tournaments will be considered. Please submit the filled in form at the GB Meeting.



JAWAHARLAL NEHRU TECHNOLOGICAL UNIVERSITY KAKINADA
UNIVERSITY SPORTS COUNCIL
KAKINADA – 533 003.

**PROFORMA FOR CONDUCTING INTER-COLLEGIATE / INTER-UNIVERSITY
SELECTION TRIALS FROM THE AFFILIATED COLLEGES FOR THE
ACADEMIC YEAR 2018-19**

1. Name of the College & Code _____

2. District _____

3. Tournament / Team Selection Trails Offered

a) JNTUK Inter-Collegiate Zonal Level Games Tournament for Men _____

b) JNTUK Single Zone Inter-Collegiate Athletic (M & W) Championship _____

d) JNTUK Inter-Collegiate Zonal Level Cricket Tournament for Men _____

e) JNTUK Inter Zonal Inter Collegiate Cricket Tournament for Men _____

f) JNTUK Women's Games Meet _____

g) JNTUK Single Zone Inter Collegiate Football (M) Tournament _____

h) JNTUK Inter Zonal Inter Collegiate Games Tournament for Men _____

4. Availability of

a) No of Play Grounds _____

b) No of Courts _____

c) No of Stadiums _____

d) No of Gymnasium _____

5. Are you specialized in the above offered Sport/Game _____

6. Have you accompanied any Game/Event in the
Inter-University Tournament in the erstwhile JNTUK _____

7. Specification (dimensions) of each available facility _____

8. Availability Officials (Umpires/Referees/Judges etc) _____

9. Details of the Lodging and Boarding for

a) Men Teams _____

b) Women Teams _____

c) Officials _____

10. Brief Description about food arrangements _____

11. Details of Medical and First Aid arrangements _____

12. Precaution proposed to be observed to control
the crowd behaviour _____

13. General information about the proposed
Arrangements for smooth conduct of the event _____

Principal

Note: Please certify that above furnished information is correct. Based on the information, your proposal for conducting of Inter-Collegiate / Inter-University team selection will be consider.

** Please use additional pages if necessary. Please submit the filled in form at the GB Meeting.