

Form I (One)

“9th Nagaland Spelling Bee Championship 2022”

“The learning Edge”

Organised by Fountain Club, Kohima in collaboration with SCERT, Nagaland

Participation Form

1. Name:
 2. Surname:
 3. F/Name:
 4. Date of Birth / Age:
 5. Gender:
 6. Community:
 7. Name of School:
 8. Class/ Standard:
 9. District:
 10. Hobbies:
 11. Ambition:
 12. Contact No. of Participant:
 - E-mail Address:
 13. Contact No. of School/ Teacher In-charge:
 14. Accommodation required: Yes/ No
(For Participant)
 15. Accommodation required: Yes/No
(For Accompanying)
 16. Food: Veg/ Non Veg
- I hereby declared that the above statements/ details are true to the best of my knowledge, any false statement(s) so detected shall subject to disqualification.
- Date:
- Place:



Student's Signature

Form II (Two)

Undertaking

1. To be filled by the Student/ Participant

I, Mr. / Ms. of
School/ Institute do hereby undertake that I shall abide with all the Rules and Regulations of
the 9th Nagaland Spelling Bee Championship 2022 as laid down by the Organisers. And
shall accept all the interpretations and decisions of the Organizers as may be imposed.

Date:

Place:

Student's Signature

2. To be filled by the Head of the Educational Institution or Competent Authority

The Principal/ Head of the Institution of
school/ Institute of

District is pleased to recommend and endorse the below mentioned student for participation
in the 9th Nagaland Spelling Bee Championship 2022, organised by the Fountain Club Kohima
in collaboration with the State Council of Education Research & Training (SCERT) Nagaland.
The Institute/ I. have read the Rules and Regulations of the Championship and shall abide
with them. The Particulars of the participating students are:-

Name:

Reading in Class):

Commendable Academic Records of the Students if any:

.....

Extra-Curricular Records of the Students if any:

.....

I hereby declare that the above statements/ Details are true to the best of my knowledge, any
false statement(s) so detected shall be subjected to disqualification.

Date: Signature:

Place: Designation:

Official Seal: