RAJASTHAN BADMINTON ASSOCIATION

 **(Affiliated with the Badminton Association of India)**

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| **President** **SudhirBaxi****Wolkem India Pvt. Ltd.** **Nobal House, SwarupSagar Road,****UDAIPUR-313003****Phone: 0294-2415111, 241202** | **Hony. Secretary** **K.K. Sharma****Irrigation Quarter, Near Central jail****BHILWARA-311001****Mobile : 94141 14119** |

Ref :RBA/2016-17/ Date: 20.08.2016

**STATE UMPIRE EXAMINATION**

**The Hony. Secretary**

**All Affiliated District Unites**

**Rajasthan Badminton Association**

**Sub:- Schedule of Umpires Examination during Sub Junior State Badminton Championship Bikaner from 7th to 12th October 2016.**

Dear All,

I feel pleasure to inform you that Rajasthan Badminton Association is going to organize the State Umpire’s Examination during the Sub Junior State Badminton Championshipscheduled to be held at Bikaner from7th to 12th October 2016.The program of the examination is as under:-

**Venue -** Badminton Hall ,DrKarni Singh Stadium, **BIKANER**

**ON 7TH OCTOBER,2016** :-

**Reporting time** - 9.00 AM

**Theory Classes** - 9.30 AM to 11.30 AM

**Practical**  - 12.30 PM onwards till end of the session

**ON 8TH OCTOBER 2016 :-**

**Reporting time** - 9.00 AM

**Practical**  - 9.30 AM to 5.00 PM

**Exam &Viva**  - 5.30 PM to 6.30 PM

Candidates can plan their return Journey on 8th October 2016, night. No TA & DA shall be paid to the candidates and they have to arrange accommodation. All candidates have to submit the application in the enclosed format latest by 30th September 2016,through the respective District Association. No direct application will be accepted. The candidates have to pay examination fee Rs. 500/ at Examination venue. (Badminton Rule book will be available for exam on cost at the venue)

With regards,

**KK SHARMA**

**Hony. Secretary**

**Encl : Application Form**

rajasthan badminton association

Application for the candidates appearing for

the state umpiresEXAN

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| 1. | Name : |  |
| 2. | Residential address : |  |
| 3. | District Badminton Association |  |
| 4. | Telephone Nos. : (R) (O) |  |
| 5. | Mobile No. : |
| 6. | E-mail address : |  |
| 7. | Date of birth : |  |
| 8. | Educational qualification : |  |
| 9. | Occupation : (Please give details) |  |
| 10 | Assignments during last two years (If any) : |
|  | Month | Year | Name of the tournament | Capacity | Venue |
|  |  | 2015 |  |  |  |
|  |  | 2016 |  |  |  |

**SIGNATURE OF THE Candidate :**

**Signature of Hon. Secretary of District**

**Association with stamp & seal**

Scanned copy should be sent at email : kksharma119@gmail.com