



YUVA KALARATNA - 2013
29th INTER-UNIVERSITY CENTRAL ZONE YOUTH FESTIVAL
NOVEMBER 18 - 22, 2013



hosted by
KAKATIYA UNIVERSITY, WARANGAL, AP
 (Estd: 1976. Accredited with 'A' Grade by NAAC)
 in association with
ASSOCIATION OF INDIAN UNIVERSITIES (AIU), NEW DELHI
 (Sponsored by Ministry of Youth Affairs and Sports, Govt. of India)

ANNEXURE – I
TEAM REGISTRATION FORM (Submit in Duplicate)

- 1) Name of the University:
- 2) Number of Participants:

	Male	Female	Total
Student participants			
Accompanists (Students + Professionals)			
Team Manager / Contingent Incharge			
Total composition of contingent			

(TOTAL NUMBER OF CONTINGENT SHOULD BE WITHIN 40)

Name of the Dean, Students' Welfare and Address with phone number and email ID:

.....

Name of the Contingent Incharge and Address with phone number and email ID:.

.....

TRAVEL PLANS

- 1) Arrival at **Warangal, AP** Date:Time.....
 Bus.....Train.....

Departure Date & Time

(Signature of Dean Students Welfare / Cultural Coordinator)

Official Stamp:

Imp: Please mail / email a copy of this completed from to **cfrac@kakatiya.ac.in / iucz2013ku@gmail.com** on or before **November 4, 2013.**



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ANNEXURE - II

Eligibility Certificate: PARTICIPANTS & ACCOMPANISTS

(Individual Form)

ATTESTED
 Photograph

General Information:

University:

Personal Information:

- 1) Name of Participant:
2. Sex: Male/Female:
3. Fathers'/Mothers' Name:
4. Date of Birth as per X Board Certificate (attach an attested copy) DD/MM/YY.....
5. Age as on 1st of July, 2013: Years Months Days
6. Year of passing XII (+2) standard: DD/MM/YY.....
7. Course / Class in which studying: Course Subject
- Enrollment No.....
8. Department / College::.....
9. Whether a participant or an accompanist:.....
10. Telephone No. : Mobile.....
11. E-mail ID.....

The above particulars furnished by me are correct and true to the best of my knowledge.

(Signature of Student Participant / Accompanist)

(The student should not have exceeded the age of 25 years as on 1st July 2013; must have not completed 8 years after passing the X class and 6 years after passing XII; should be enrolled in a full-time degree course or diploma course to over one year duration)

Certified that the particulars provided above have been verified and found to be correct to the best of my knowledge.

(Director / Dean / Principal)
 Official Seal

(DSW / Cultural Coordinator)
 Official Seal

For office use only: Eligible / Not Eligible:
 (Reason, if not eligible):.....

Authorized Signature



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ANNEXURE – III
Curriculum Vitae of Participant / Accompanying Artiste

Note: This proforma is to be filled in by each member of the contingent

1. Name:
2. University:.....
3. Class Studying:.....
4. Residential Address:
-
5. Contact No.....
6. No. of times participated in:.....
Zonal / National Festival
6. Performance and Distinction:.....
Earned in the field
7. Distinction in other fields, if any.....

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 Official Seal

(DSW / Cultural Coordinator)
 Official Seal

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ANNEXURE – IV
MASTER ENTRY FORM

1. NAME OF THE UNIVERSITY:

2. NAMES OF PARTICIPANTS & ACCOMPANISTS IN **MUSIC / THEATRE / DANCE LITERARY / FINE ARTS** (Please tick one of the main categories of the event, then enter the item-wise name within the category. Fill in separate form for all the main category items, say Music, then say Group Song Indian, then accompanist in One Act Play, Western Solo, etc.):

3. **Cut-off Date for Age: Student should not have born before 1.7.1988**

Sl. No.	Name of the participants (Please write in block letters your name as you would like it to be written on the Certificate, Check the spellings)	Date of Birth	Item(s) in which Participating as a participant	Item(s) in which participating as an accompanist
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				
11				
12				

(Please make copies of this form for additional names)

(Contingent Incharge)
 Official Seal

(DSW / Cultural Coordinator)
 Official Seal

For office use only: Authorized Signature.....