



Name of the Coach:	Game:
Agency attached to : NS Regional Centre	Place of posting: Lucknow, लखनऊ
Coaching Venue : Morning: Regional Centre, Evening : - Do -	Visiting office: From :

1.Number of Trainees attending coaching regularly:

[illegible]

2. Present level of ranking and number of trainees (Please enter highest level only) :

All recent level of ranking and number of trainees (Please enter highest level only) :					
	1	2	3	4	5
Ranking	International	National	AIU	National SGFI	Zonal
	NIL	01	NIL	NIL	Nil
State(Open) / State School		Inter College	District	Inter School	Total Number

3. Coaching Program of the Month :

[illegible]

04. Competition / Matches played during the Month :

Name of Trainee	Competition	Date: From----To--	Venue	Category	Results

05. Any Other assignment/ information:

S.NO.	Assignment	Venue & Dates From ----- to-----	Details

Date of submission :

Place : Lucknow लखनऊ

Signature of Coach:

Name

खेल:

Note:-

1. Wherever necessary, separate sheet be attached to have complete information.
2. Reports to be filled nearly in Quadruplicate and complete in all respect. The original to be submitted at NS Regional-Centre SAI, Lucknow by 5th of every month, 2nd copy to agency attached, 3rd copy to coordinator of respective State and 4th copy to be retained by the coach for personal records and future reference.

Remarks of the local supervisory officer : _____

For Monitoring Cell

Report checked and reply sent to _____

Comments if any _____

To be / Not to be processed for further necessary action

In-Charge
Monitoring Cell
प्रभारी मोनिटरिंग सेल