



# School Registration Form

## SOF Olympiads 2018-19

**CLOSING DATE:**  
**31<sup>st</sup> August 2018**  
SOF School Code

1. School Name (Capital Letters)	<input type="text"/>																												
2. School Address (Capital Letters)	<input type="text"/> <input type="text"/> City <input type="text"/> District <input type="text"/> State <input type="text"/> Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																												
3. Name of Trust/ Society running the school	<input type="text"/>																												
4. GST Number of Trust / Society	<input type="text"/>																												
5. School Ph. No.	<input type="text"/> STD Code				<input type="text"/> Phone 1						<input type="text"/> Phone 2						<input type="text"/> Phone 3												
6. School E-mail	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. Principal's Name and Ph. No.	<input type="text"/>														<input type="text"/> STD Code		<input type="text"/> Phone No. / Mobile												
8. Principal's E-mail	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. IGKO Incharge Teacher's Name	<input type="text"/>							<input type="text"/> Phone No. / Mobile							<input type="text"/> E-mail														
10. IEO Incharge Teacher's Name	<input type="text"/>							<input type="text"/> Phone No. / Mobile							<input type="text"/> E-mail														
11. NSO Incharge Teacher's Name	<input type="text"/>							<input type="text"/> Phone No. / Mobile							<input type="text"/> E-mail														
12. IMO Incharge Teacher's Name	<input type="text"/>							<input type="text"/> Phone No. / Mobile							<input type="text"/> E-mail														
13. NCO Incharge Teacher's Name	<input type="text"/>							<input type="text"/> Phone No. / Mobile							<input type="text"/> E-mail														
14. ICSO Incharge Teacher's Name	<input type="text"/>							<input type="text"/> Phone No. / Mobile							<input type="text"/> E-mail														

**IMPORTANT:** Ensure you have filled-in all boxes above. Write legibly in **BLOCK CAPITALS** for ease of communication and accuracy in issuance of certificates.



SEPT. 11 & SEPT. 25



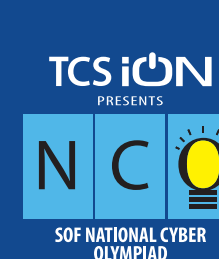
OCT. 4, OCT. 11 & OCT. 23



NOV. 1, NOV. 15 & NOV. 27



DEC. 4, DEC. 13 & DEC. 18



DEC. 20 & JAN. 31



DEC. 20 & JAN. 31



**National Office:**  
Plot 99, First Floor, Sector 44, Institutional Area,  
Gurgaon - 122003 (HR) Tel.: 0124-4951200  
E-mail: [info@sofworld.org](mailto:info@sofworld.org)  
[www.sofworld.org](http://www.sofworld.org)

15.

	SOF International General Knowledge Olympiad	
	*Select Date of Exam(✓) <input type="checkbox"/> 11 <sup>th</sup> Sept. <input type="checkbox"/> 25 <sup>th</sup> Sept.	
Class	Name of the Teacher	No. of Students
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11	N/A	
12		
	Total number of students	
	*Selected Date of Exam <input type="text"/>	

SOF International English Olympiad		SOF National Science Olympiad	
*Select Date of Exam (✓) <input type="checkbox"/> 4 <sup>th</sup> Oct. <input type="checkbox"/> 11 <sup>th</sup> Oct. <input type="checkbox"/> 23 <sup>rd</sup> Oct.		*Select Date of Exam (✓) <input type="checkbox"/> 1 <sup>st</sup> Nov. <input type="checkbox"/> 15 <sup>th</sup> Nov. <input type="checkbox"/> 27 <sup>th</sup> Nov.	
Name of the Teacher	No. of Students	Name of the Teacher	No. of Students
Total number of students		Total number of students	
*Selected Date of Exam		*Selected Date of Exam	

SOF International Mathematics Olympiad		SOF National Cyber Olympiad		SOF International Company Secretaries Olympiad		
*Select Date of Exam (✓) <input type="checkbox"/> 4 <sup>th</sup> Dec. <input type="checkbox"/> 13 <sup>th</sup> Dec. <input type="checkbox"/> 18 <sup>th</sup> Dec.		*Select Date of Exam(✓) <input type="checkbox"/> 20 <sup>th</sup> Dec. <input type="checkbox"/> 31 <sup>st</sup> Jan.		*Select Date of Exam(✓) <input type="checkbox"/> 20 <sup>th</sup> Dec. <input type="checkbox"/> 31 <sup>st</sup> Jan.		
Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Class
				<p>In partnership with The Institute of Company Secretaries of India (ICSI), Ministry of Corporate Affairs, Govt. of India. Students of class 11 &amp; 12 from any stream (Science, Commerce &amp; Humanity) may participate.</p> <p style="text-align: center;">↓</p>		1
						2
						3
						4
						5
						6
						7
						8
						9
						10
						11
						12
Total number of students		Total number of students		Total number of students		
*Selected Date of Exam <input type="text"/>		*Selected Date of Exam <input type="text"/>		*Selected Date of Exam <input type="text"/>		

16. **FEES:** A participation fee of ₹ 125/Student/Olympiad, is to be collected by the school from the students for and on behalf of SOF and sent to SOF. The school may collect an additional ₹ 25/Student/Olympiad on its own account and utilise it towards honorarium of the incharge, remuneration to teachers to teach / guide using study material supplied by SOF and for offsetting miscellaneous expenses. No fee is payable for students with major physical disability or Indian student whose parent was martyred during defence operations.

17. **MODE OF PAYMENT:** The school may make payment through any of the following modes: OR

OR

Schools may send payment directly through 'NEFT/RTGS/TRANSFER'.  
(Kindly tick ✓ the box and fill the following details. Please mention school code.)

Please make DD in favour of **SCIENCE OLYMPIAD FOUNDATION**, payable at New Delhi.

Demand Draft No.	Date	for ₹
Drawn on:		

OR

Transfer payment online at <https://eazypay.icicibank.com>

Date	for ₹	Txn. ID:
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Bank Name	Current A/C No.	IFSC	Branch
ICICI Bank	031405004031	ICIC 0000 314	Sushant Lok, Gurgaon
Kotak Mahindra Bank	0912330349	KKBK 0000 291	Galleria Market, Gurgaon

Date	for ₹	Txn. ID:
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18. Are you applying directly or through a Co-ordinator from SOF? (Please tick ✓):

<input type="checkbox"/> Directly	<input type="checkbox"/> SOF Co-ordinator	Name of the SOF Co-ordinator	
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Grand total No. of students	
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Principal's signature with date and school stamp