SCHOOL REGISTRATION FORM
SOF OLYMPIADS 2014-15

SOF SCHOOL CODE

CLOSING DATE
31st August 2014

1. School Name (Capital Letters)

2. School Address (Capital Letters)

City _____ District _____ State _____ Pin Code

3. School Ph. No.

STD Code | Phone 1 | Phone 2 | Fax

4. School e-mail

5. Principal's Name and Ph. No.

STD Code | Phone No. / Mobile

6. Principal's e-mail

7. NCO Incharge Teacher's Name | Ph. No./Mobile | e-mail

8. NSO Incharge Teacher's Name | Ph. No./Mobile | e-mail

9. IMO Incharge Teacher's Name | Ph. No./Mobile | e-mail

10. IEO Incharge Teacher's Name | Ph. No./Mobile | e-mail

NOTE : Filling of all columns above is mandatory. Please give correct and legible details for ease of communication/issuance of certificates.

SOF
SCIENCE OLYMPIAD FOUNDATION

National Office : Plot 99, Sector 44 Institutional Area, Gurgaon - 122003 (HR).
Tel.: 0124-4951200 e-mail : info@sofworld.org   web : sofworld.org

NCO
14TH SOF NATIONAL CYBER OLYMPIAD

NSO
17TH SOF NATIONAL SCIENCE OLYMPIAD

IMO
8TH SOF INTERNATIONAL MATHEMATICS OLYMPIAD

IEO
5TH SOF INTERNATIONAL ENGLISH OLYMPIAD

P.T.O.

11.

Class	14th SOF National Cyber Olympiad *Select Date of Exam (✓) ☐ 18th Sep OR ☐ 14th Oct		17th SOF National Science Olympiad *Select Date of Exam (✓) ☐ 12th Nov OR ☐ 25th Nov		8th SOF International Mathematics Olympiad *Select Date of Exam (✓) ☐ 4th Dec OR ☐ 18th Dec		5th SOF International English Olympiad *Select Date of Exam (✓) ☐ 20th Jan OR ☐ 29th Jan		Class
	No. of Students	Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Name of the Teacher	
1		N/A							1
2									2
3									3
4									4
5									5
6									6
7									7
8									8
9									9
10									10
11									11
12									12
Total		National Cyber Olympiad		National Science Olympiad		International Mathematics Olympiad		International English Olympiad	

Grand Total No. of Students _____

12. **FEES :** A participation fee of ₹ **120/-** per Student per Olympiad to meet out cost of examination is to be collected by the school. The school shall retain ₹ **20/-** per **Student** per **Olympiad** of the fee collected towards the honorarium of the incharge, remuneration to teachers to teach /guide using the study material supplied by SOF and offsetting miscellaneous expenses.

13. **MODE OF PAYMENT** : The concerned school should remit ₹ **100/-** per **Student** per **Olympiad** of the fee collected to meet out cost of examination to SOF's account vide Demand Draft in favour of **Science Olympiad Foundation** payable at New Delhi.

Please make DD in favour of **Science Olympiad Foundation, payable at New Delhi**.

Demand Draft No.	Date	for ₹

OR

Schools can also send payment directly through "NEFT/RTGS". Details are given below:

Beneficiary Name: Science Olympiad Foundation

Beneficiary A/c No.: SOFXXXXXX (**XXXXXX denotes School code allotted by Science Olympiad Foundation**)

Beneficiary Bank Name: **ICICI Bank** | Beneficiary Branch : **CMS** | IFSC Code : **ICIC0000103**

14. Are you applying directly or through SOF Co-ordinator ? (Please tick ✓) : ☐ Directly ☐ SOF Co-ordinator

_____
Name of the SOF Coordinator

_____
Principal's Signature with date and school's seal

SOF SCIENCE OLYMPIAD FOUNDATION

*Please select one date for conducting the OLYMPIAD in your school. Change of date will not be permitted. There are separate question papers for different dates.
This form should reach SOF, Gurgaon by 31st August 2014. | Please DON'T PAY CASH.