

## **School Registration Form** SOF Olympiads 2023-24

**Important:** Closing date

30 days before	the selected	date of e	ach exam
	SOF	Schoo	<b>I</b> Code

1.	School Name (Capital Letters)		I GI						
2.	School Address (Capital Letters)								
		CityDistrict	21 SEPT.						
		StatePin Code	I E						
3.	Name of Trust/ Society running the school		SOF INTERNATI OLYM 26 SEPT. 12 0						
4.	GST Number of Trust / Society		NI C						
5.	School Ph. No.	STD Code Phone 1 Phone 2	SOF NATION						
6.	School E-mail		OLYM 17 OCT. 21 M						
7.	Principal's Name and Ph. No.	Phone No. / Mobile	IN						
8.	Principal's E-mail		SOF INTER MATHEMATIC						
9.	Overall Coordinator's Name	Phone No. / Mobile	31 OCT. 30 P						
		E-mail	N						
10.	IGKO Incharge Teacher's Name	Phone No. / Mobile	SOF NATION OLYM						
		E-mail	28 NOV.						
11.	IEO Incharge Teacher's Name	Phone No. / Mobile	1 53						
		E-mail							
12.	NSO Incharge Teacher's Name	Phone No. / Mobile	12 DEC.						
		E-mail	THE INST Company Secre						
13.	IMO Incharge Teacher's Name		भारतीय कम्पनी statutory body under PRES						
	reactier's Name	Phone No. / Mobile  E-mail	1 0						
14.	NCO Incharge		SOF INTER COMMERCE						
	Teacher's Name	Phone No. / Mobile	12 DEC.						
15	ISSO Inchargo	E-mail	C C						
13.	ISSO Incharge Teacher's Name	Phone No. / Mobile	SCIENCE OLYMPIA Plot N						
		E-mail	First Floor, Gurugram - 1 Inc						
16.	ICO Incharge Teacher's Name	Phone No. / Mobile	Tel.: 0124 E-mail: info@ www.sofv						
		E-mail							



















lo. 99, Sector 44, 122003 (HR),

-4951200 sofworld.org world.org

17.	SOF International General Knowledge (	Olympiad	S0	SOF International English Olympiad		piad	SOF National Science Olympiad			
	*Select Date 21st Sep. □ 10th (	Oct.	*Select D of Exam	ate (√) 26 <sup>th</sup> Sep.	12 <sup>th</sup> Oct.	2 <sup>nd</sup> Nov.	*Select Date of Exam(√) ☐ 17 <sup>th</sup>	Oct. 21st Nov.	5 <sup>th</sup> Dec.	
Class	Name of the Teacher	No. of Students	N	lame of the Te	acher	No. of Students	Name of th	ie Teacher	No. of Students	Class
1										1
2										2
3										3
4										4
5										5
7										7
8										8
9										9
10										10
11	NA									11
12	Total number of students		Tot	al number of s	tudents		Total numbe	r of students		12
	*Selected Date of Exam		*Selected	Date of Exam			*Selected Date of Exam	1		
	SOF International Mathematics Oly	mpiad			her Olympia	1			mniad	
	*Select Date 21st Oct 20th Nov	14 <sup>th</sup> Dec.	<b>*</b> S	SOF National Cyber Olympiad  *Select Date  \$28th Nov. 19th [			*Select Date   12th Dec.   18			
	ot Exam(V)	No. of		i exam(v) —		No. of	of Exam(√)		No. of	a.
Class	Name of the Teacher	Students	N	ame of the Tea	acher	Students	Name of th	e leacher	Students	Class
2							N.	A		2
3										3
4										4
5										5
6										6
7										7
8										8
10										9
11			Tot	al number of s	tudents		Total numbe	r of students		10
12			*Selected	Date of Exam			*Selected Date of Exan	n		
	Total number of students		19.	MODE OF PAYI	MENT: The sc	hool may	make payment through any of the following modes			des fo
	*Selected Date of Exam		(a)	SOF Registrations only:			NIVAADIAD FOUNDATION was also at New Dallei			
	SOF International Commerce Olymp	iad	(a)	Demand Draft No.	Date		DLYMPIAD FOUNDATION, payable at New Delhi.			•
	*Select Date of Exam(√) ☐ 12 <sup>th</sup> Dec. ☐ 18 <sup>th</sup> Jan.			Drawn on (Bank & Branch): OR						
Class		No. of Students	(b)	(b) Transfer the payment online at https://eazypay.icicibank.com (For schools in Inc			India only	/)		
11		Students	Date for ₹ Txn.ID: OR							
12			(c) Schools may send payment directly through 'NEFT/RTGS/TRANSFER'.  (Please fill the following details and mention school code.)							
	Total number of students			Bank Name	O314050040			<b>nch</b> k, Gurugram		
	*Selected Date of Exam			Standard	531051209			ity, Gurugram		
	egistration fee: Schools in India, Ba			Chartered Bank				,, ,		
	hutan & Nepal pay to SOF a registration f ncluding GST) per student / Olympia		•	Date	for ₹		Txn. ID:	OR		_
to	owards cost of examination. Schools may dditional ₹25 per student / Olymp	charge ar	1 (a)	Rupay/BHIM U		realt Card	/ Debit Card Powere	ed by		
to	towards honorarium of incharge, remuneration to		)	Date for ₹		₹	Txn. ID:			<b>2</b>
N	teachers to teach and guide, and for other expenses No fee is payable for students suffering from any		y	UPI Address	SOF	@SC	QR Code (to	scan and pay)		账
	najor physical disability, or an Indian stud arent was martyred during defence oper		20.	Are you applyir	ng directly or	through a	Co-ordinator from S	OF? (Please tick ✓	):	
	, ,				OF Co-ordinat	tor				
M	Grand total			ne of the Co-ordinator						
	No. of Registrations  Principal's signature with date and school stamp									
	*Please select one date for conducting the SOF OLYMPIAD in your school. Change of date will not be permitted. There are separate question papers for different dates.  This form may be sent to: SOF, Plot No. 99, First Floor, Sector 44, Gurugram - 122003 (HR) India 30 days before the selected date of each exam   PLEASE DO NOT PAY CASH.									