

1. School Name (Capital Letters)	<input type="text"/>		
2. School Address (Capital Letters)	<input type="text"/> <input type="text"/> <input type="text"/>		
	City <input type="text"/>	District <input type="text"/>	
	State <input type="text"/>	Pin Code <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.	STD Code <input type="text"/>	Phone 1 <input type="text"/>	Phone 2 <input type="text"/>
6. School E-mail	<input type="text"/>		
7. Principal's Name and Ph. No.	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
8. Principal's E-mail	<input type="text"/>		
9. IGKO Incharge Teacher's Name	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
	E-mail <input type="text"/>		
10. IEO Incharge Teacher's Name	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
	E-mail <input type="text"/>		
11. NSO Incharge Teacher's Name	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
	E-mail <input type="text"/>		
12. IMO Incharge Teacher's Name	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
	E-mail <input type="text"/>		
13. NCO Incharge Teacher's Name	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
	E-mail <input type="text"/>		
14. ICO Incharge Teacher's Name	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
	E-mail <input type="text"/>		
15. ISSO Incharge Teacher's Name	<input type="text"/>	Phone No. / Mobile <input type="text"/>	
	E-mail <input type="text"/>		

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



**SOF INTERNATIONAL GENERAL  
KNOWLEDGE OLYMPIAD**  
DATE - 1 16 & 17 OCT.  
DATE - 2 13 & 14 NOV.



**SOF INTERNATIONAL ENGLISH  
OLYMPIAD**  
DATE - 1 23 & 24 OCT.  
DATE - 2 30 & 31 OCT.  
DATE - 3 20 & 21 NOV.



**SOF NATIONAL SCIENCE  
OLYMPIAD**  
DATE - 1 27 & 28 NOV.  
DATE - 2 11 & 12 DEC.  
DATE - 3 18 & 19 DEC.



**SOF INTERNATIONAL  
MATHEMATICS OLYMPIAD**  
DATE - 1 4 & 5 DEC.  
DATE - 2 24 & 26 DEC.  
DATE - 3 8 & 9 JAN.



**SOF NATIONAL CYBER  
OLYMPIAD**  
DATE - 1 1 & 2 JAN.  
DATE - 2 29 & 30 JAN.



**SOF INTERNATIONAL  
COMMERCE OLYMPIAD**  
DATE - 1 22 & 23 JAN.  
DATE - 2 5 & 6 FEB.

**INTRODUCING**



**SOF INTERNATIONAL  
SOCIAL STUDIES OLYMPIAD**  
DATE - 1 22 & 23 JAN.  
DATE - 2 5 & 6 FEB.



**National Office:**  
Plot No. 99, First Floor,  
Sector 44, Institutional Area  
Gurugram - 122003 (HR),  
India  
Tel.: 0124-4951200  
E-mail: info@sofworld.org  
www.sofworld.org

P.T.O.

SOF International General Knowledge Olympiad			SOF International English Olympiad		SOF National Science Olympiad		
*Select Date of Exam (✓) <input type="checkbox"/> 16 <sup>th</sup> Oct. & 17 <sup>th</sup> Oct. <input type="checkbox"/> 13 <sup>th</sup> Nov. & 14 <sup>th</sup> Nov.			*Select Date of Exam (✓) <input type="checkbox"/> 23 <sup>rd</sup> Oct. & 24 <sup>th</sup> Oct. <input type="checkbox"/> 20 <sup>th</sup> Nov. & 21 <sup>st</sup> Nov. <input type="checkbox"/> 30 <sup>th</sup> Oct. & 31 <sup>st</sup> Oct.		*Select Date of Exam (✓) <input type="checkbox"/> 27 <sup>th</sup> Nov. & 28 <sup>th</sup> Nov. <input type="checkbox"/> 18 <sup>th</sup> Dec. & 19 <sup>th</sup> Dec. <input type="checkbox"/> 11 <sup>th</sup> Dec. & 12 <sup>th</sup> Dec.		
Class	Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Class
1							1
2							2
3							3
4							4
5							5
6							6
7							7
8							8
9							9
10							10
11	N/A						11
12							12
Total number of students			Total number of students			Total number of students	
*Selected Date of Exam			*Selected Date of Exam			*Selected Date of Exam	
SOF International Mathematics Olympiad			SOF National Cyber Olympiad		SOF International Social Studies Olympiad		
*Select Date of Exam (✓) <input type="checkbox"/> 4 <sup>th</sup> Dec. & 5 <sup>th</sup> Dec. <input type="checkbox"/> 8 <sup>th</sup> Jan. & 9 <sup>th</sup> Jan. <input type="checkbox"/> 24 <sup>th</sup> Dec. & 26 <sup>th</sup> Dec.			*Select Date of Exam (✓) <input type="checkbox"/> 1 <sup>st</sup> Jan. & 2 <sup>nd</sup> Jan. <input type="checkbox"/> 29 <sup>th</sup> Jan. & 30 <sup>th</sup> Jan.		*Select Date of Exam (✓) <input type="checkbox"/> 22 <sup>nd</sup> Jan. & 23 <sup>rd</sup> Jan. <input type="checkbox"/> 5 <sup>th</sup> Feb. & 6 <sup>th</sup> Feb.		
Class	Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Name of the Teacher	No. of Students	Class
1					N/A		1
2							2
3							3
4							4
5							5
6							6
7							7
8							8
9							9
10							10
11			Total number of students		Total number of students		
12			*Selected Date of Exam		*Selected Date of Exam		
Total number of students			Total number of students			Total number of students	
*Selected Date of Exam			*Selected Date of Exam			*Selected Date of Exam	
SOF International Commerce Olympiad							
*Select Date of Exam (✓) <input type="checkbox"/> 22 <sup>nd</sup> Jan. & 23 <sup>rd</sup> Jan. <input type="checkbox"/> 5 <sup>th</sup> Feb. & 6 <sup>th</sup> Feb.							
Class	Name of the Teacher	No. of Students					
11							
12							
Total number of students							
*Selected Date of Exam							

**17. Registration fee:** Schools in India, Bangladesh, Bhutan & Nepal pay to SOF a registration fee of ₹ 125 (including GST) per student / Olympiad exam towards cost of examination. Schools may charge an additional ₹ 25 per student / Olympiad exam towards honorarium of incharge, remuneration to teachers to teach and guide, and for other expenses. No fee is payable for students suffering from any major physical disability, or an Indian student whose parent was martyred during defence operations.

<b>Grand total No. of students</b>	
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**18. MODE OF PAYMENT:** The school may make payment through any of the following modes:

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

Demand Draft No.	Date	for ₹
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Drawn on (Bank & Branch): \_\_\_\_\_ OR

(b) Transfer the payment online at <https://eazypay.icicibank.com> (For schools in India only)

Date	for ₹	Txn. ID:	OR
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(c) Schools may send payment directly through 'NEFT/RTGS/TRANSFER'.

(Please fill the following details and mention school code.)

Bank Name	Current A/C No.	IFSC	Branch
ICICI Bank	031405004031	ICIC 0000 314	Sushant Lok, Gurugram
Standard Chartered Bank	53105120914	SCBL0036025	DLF Cyber City, Gurugram

Date	for ₹	Txn. ID:	OR
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(d) Schools may pay through Credit Card / Debit Card Powered by Rupay/BHIM UPI/UPI.

Date	for ₹	Txn. ID:
UPI Address	SOF@SC	QR Code (to scan and pay)



19. Are you applying directly or through a Co-ordinator from SOF? (Please tick ✓):

☐ Directly ☐ SOF Co-ordinator

Name of the SOF Co-ordinator

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Principal's signature with date and school stamp

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\*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 Institutional Area, Gurugram - 122003 (HR) India 30 days before selected date of each exam | **PLEASE DO NOT PAY CASH.**

**Note :** Dates of exams may change depending on impact of Corona on functioning of schools.