

**Note: Kindly Fill the Annexure-I & II and submit it to  
the Department (School Of Physical Education)**

**Additional Forms for Admission in BPES Course  
(2023-24)**

**School of Physical Education**

**Devi Ahilya Vishwavidyalaya, Indore**

**[www.sope.davv.ac.in](http://www.sope.davv.ac.in), [www.dauniv.ac.in](http://www.dauniv.ac.in)**

SCHOOL OF PHYSICAL EDUCATION

DEVI AHILYA UNIVERSITY, INDORE

Annexure-I

DETAILS OF SPORTS ACHIEVEMENTS

S. N.	Name of the Competition	Name of Game	Name of the Institution Represented	Year	Position
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

**Note:-** Attach the attested photocopy of the certificates

**OPTION OF THE GAME FOR ADMISSION TEST:-**

**BPES (Any One Game):-** 1. \_\_\_\_\_

**List of Games for Option:-**

Hockey, Football, Volleyball, Basketball, Tennis, Badminton, Table Tennis, Cricket, Judo, Hand ball, Kho-Kho, Kabaddi, Swimming, Gymnastics, Wrestling, Weight lifting, Yoga, Track & Field (Two events – one Track and one field event)

**Note: -The School of Physical Education has the rights to include or delete any game according to administrative feasibility.**

**Name of the Applicant**

**Signature of the Applicant**

# देवी अहिल्या विश्वविद्यालय, इन्दौर

## DEVI AHILYA UNIVERSITY, INDORE

चिकित्सा प्रमाणपत्र

(चिकित्सा अधिकारी द्वारा प्रमाणित)

### MEDICAL CERTIFICATE

(To be certified by a Registered Medical Officer)

1. Name:-\_\_\_\_\_ Sex:- \_\_\_\_\_(M/F) Blood Gr.\_\_\_\_\_
2. Height (in cm):-\_\_\_\_\_ Weight(in kg):-\_\_\_\_\_
3. Physical appearance and Musculature:- Robust/Average/Weak
4. Previous History of Fracture or other injuries (Give Details):-  
\_\_\_\_\_  
\_\_\_\_\_
5. C.N.S.:-\_\_\_\_\_
6. C.V.S.:-\_\_\_\_\_
1. Respiratory System:-\_\_\_\_\_
2. Liver:-\_\_\_\_\_
3. Spleen:-\_\_\_\_\_
4. Hernia Site:-\_\_\_\_\_
5. Throat:-\_\_\_\_\_
6. Ears (Perforation/Discharge/ Any other) :-\_\_\_\_\_
7. Hearing:-\_\_\_\_\_
8. Eyes:-\_\_\_\_\_ Vision(Without Glass):-\_\_\_\_\_
- Color Blind (Partial/Complete):- \_\_\_\_\_
9. Any Body deformity (Such as Kyphosis, Lordosis, Scoliosis, Knock Knee, Bow  
Legs Flat Feet etc):-\_\_\_\_\_
10. History of Epilepsy, Asthma, T.B., V.D., Allergy, etc.:-\_\_\_\_\_
11. Sensibility to drugs ,if any :-\_\_\_\_\_

I certify that I have this day carefully examined (Name)\_\_\_\_\_

And have recorded my observation as given above. I am satisfied that he /she is fit/unfit for undergoing training in Physical Education which involves strenuous physical activities and competitive games. I further certify that the candidate has been inoculated/vaccinated for:

- |                       |                       |
|-----------------------|-----------------------|
| (a) Tetanus:_____     | (b) Typhoid :_____    |
| (c) Chickenpox :_____ | (d) Hepatitis-b:_____ |
| (e) Any Other:_____   |                       |

Signature of the Candidate

Date:\_\_\_\_\_

Signature:\_\_\_\_\_

Name:\_\_\_\_\_

Reg. No. \_\_\_\_\_

Address:\_\_\_\_\_

Seal:

**SCHOOL OF PHYSICAL EDUCATION  
DEVI AHILYA UNIVERSITY, INDORE**

**NORMS FOR MODIFIED AAHPER YOUTH FITNESS TEST  
(BOYS)**

MARKS	TEST ITEMS						MARKS
	50 Mts Dash (Sec)	Pull-Ups Overarm Grip (No.)	Bent Knee Sit-Ups (No.)	Shuttle Run 10x4mts (Sec)	Standing Broad Jump (Mts)	600 mts Run /Walk (Sec)	
10	5.49	16	67	7.60	3.00	99.00	10
9	5.87	15	61	8.13	2.89	102.84	9
8	6.23	13	55	8.66	2.78	106.68	8
7	6.63	11	50	9.19	2.67	110.52	7
6	7.01	10	44	9.72	2.56	114.36	6
5	7.39	8	38	10.25	2.45	118.20	5
4	7.77	6	33	10.78	2.34	122.04	4
3	8.15	5	27	11.31	2.23	125.88	3
2	8.53	3	21	11.84	2.12	129.72	2
1	8.91	1	15	12.37	2.01	133.56	1
0	9.29	0	10	12.90	1.90	137.40	0
MEAN	7.39	8.00	38.30	10.25	2.45	118.20	MEAN
S.D	0.54	2.39	8.18	0.75	0.16	5.48	S.D
SCALE INTERVAL	0.38	1.67	5.73	0.53	0.11	3.84	SCALE INTERVAL

**Formula for converting performance into Marks (i.e. raw score into scale value)**

**Marks = (ZV-X) / SI                      For test items (50 Mts, Shuttle Run & 600 Mts Run/Walk)**

**Marks = (X-ZV) / SI                      For test items (Pullups, Situps & St. Broad Jump)**

**Where,            X            = Actual Performance in the test**

**ZV            = Zero value of the scale in particular test**

**SI            = Scale Interval of the particular test**

**Note: The highest and lowest marks for any performance in any test item will be 10 & 0 respectively.**

**SCHOOL OF PHYSICAL EDUCATION**  
**DEVI AHILYA UNIVERSITY, INDORE**  
**NORMS FOR MODIFIED AAHPER YOUTH FITNESS TEST**  
**(GIRLS)**

MARKS	TEST ITEMS						MARKS
	50 mts Dash (Sec)	Inclined Pull-Ups Overarm Grip (No.)	Bent Knee Sit-Ups (No.)	Shuttle Run 10x4mts (Sec)	Standing Broad Jump (Mts)	600 mts Run /Walk (Sec)	
10	6.19	70	48	9.03	2.65	102.15	10
9	6.74	64	44	9.65	2.47	113.28	9
8	7.29	58	39	10.27	2.29	124.41	8
7	7.84	52	34	10.89	2.11	135.54	7
6	8.39	46	30	11.51	1.93	146.67	6
5	8.94	40	25	12.13	1.75	157.80	5
4	9.49	34	20	12.75	1.57	168.93	4
3	10.04	28	16	13.37	1.39	180.06	3
2	10.59	22	11	13.99	1.21	191.19	2
1	11.14	16	7	14.61	1.03	202.32	1
0	11.69	10	2	15.23	0.85	213.43	0
MEAN	8.94	39.9	25.10	12.13	1.75	157.80	MEAN
S.D	0.78	8.69	6.62	0.88	0.25	15.90	S.D
SCALE INTERVAL	0.55	6.08	4.63	0.62	0.18	11.13	SCALE INTERVAL

**Formula for converting performance into Marks (i.e. raw score into scale value)**

**Marks = (ZV-X) / SI      For test items (50 Mts, Shuttle Run & 600 Mts Run/Walk)**

**Marks = (X-ZV) / SI      For test items (Pullups, Situps & St. Broad Jump)**

**Where,      X      = Actual Performance in the test**

**ZV      = Zero value of the scale in particular test**

**SI      = Scale Interval of the particular test**

**Note:      The highest and lowest marks for any performance in any test item will be 10 & 0 respectively.**

**Kindly fill the Annexure-I and Annexure-II and submit it to the department.**