

**NATIONAL LEVEL SCIENCEX OLYMPIAD 2025
REGISTRATION FORM (OFFLINE)**

Please fill this form in **BLOCK LETTERS**

1. Name of the School: _____

2. Postal Address: _____

3. District/ City: _____

4. State: _____

5. Pin Code (Compulsory): _____

6. Country: _____

7. Phone No. (with STD Code): _____

8. Name of the Principal: _____

9. Email Address (School/Principal): _____

10. Name of the Coordinating Teacher: _____

11. Email Address of Coordinating Teacher: _____

12. Mobile No. (Principal or Coordinator): _____

13. Category of School (Tick): KVS NVS Gov. Aided Private

14. List of Students (Format Attached):

S.No.	Name of Student	Class	Sec.	Gender	Email	Exam1	Exam2	Exam3	Fee Paid	Sign
1										
2										
3										
4										

15. Select preferred date for appearing in the NLSO exam (Tick ONE only):

Oct 2025 Nov 2025

16. DD No./UTR No./Transaction Reference No. (Attach Proof): _____

17. Fee Amount: _____

Declaration: I declare that the above information is true to the best of my knowledge and submitted as per the registration requirement.

Signature of Coordinating Teacher

Signature of Principal with School Seal