Form I National cadet Corps Senior Division/Wing Enrolment Form (See Rules 7 and 11) APPLICATION FOR ENROLMENT

PHOTO

1. 2.	What is your Name? (in block letters) What is your parent/guardian's name & address?	1. . 2. .
3. 4.	Are you a citizen of India, or a subject of Nepal? What is your village, Tehsil or Taluka & District?	Tel.No. 3. 4. Village Tehsil or Taluka District
5. 6.	What is your Post Office? What is your Railway Station?	Pin Code
7. 8.	What are your educational qualification? What is your age & Date of birth?	7
9.	Have you ever been convicted by a criminal court and if so in what circumstances and what was the Sentence?	9
	In which college are your now studying? Are you willing to be enrolled under the National	10
	Cadet Corps Act, 1948? In which unit do you desire to be enrolled? Are you willing to undergo service training as	11
	Specified in the Act and the rules made thereunder? Are you willing to serve in the National Cadet Corps	13
15.	Until discharged as provided in the act? Have you ever previously applied for enrolment Under the act, and if so with what result?	14
16.	Have been dismissed from the National Cadet corps, The Territorial Army or the Indian Armed forces?	16
* 17.	Next of kin with address (with relationship) Telephone No. (O)/(R) (as applicable)	17
* Pla	ace:	Signature of Applicant
Da	te:	

Note: * These are not included in Form I of NCC Act & Rules.

DECLARATION ON ACCEPTANCE FOR ENROLMENT

1. I solemnly declare that the answers I have given t and that I am willing to fulfil the engagement mad	o the questions in this form are true and that no part of them is false			
	e. promise that I will honestly and faithfully serve my country and abide			
by the rules and Regulation of the National Cadet	Corps that I will, to the best of my ability.			
	further promise that after enrolment, I will have no claim or			
while on YEP or any other such NCC events like I	injury due to accident during training camps, courses, travelling and RDC and IDC. I understand I have no service liability.			
* Place:				
Date:	Signature of Applican			
DECLARATIO	ON BY PARENT/GUARDIAN			
son/daughter/wars is willing to fulfil the engagement	olemnly declare that the answer given in this form are true and that no part of them is false, and that my n/daughter/wars is willing to fulfil the engagement made.			
Ipromise that after enrolment of my son/daughter/ward, I will have no claim authorities for any compensation in the event of any injury or death due to accident during training camps, courses, travelling and while on YPE or any other such NCC events like RDC and IDC.				
*				
Place: Date:	Signature of Parent/Guardian			
Date.	Signature of Latern Guardian			
(CERTIFICATE			
Certified that the applicant and his parent/guardia	n understand and agree to the conditions of enrolment.			
*				
Place				
Date of Enrolment: (Unit Seal)	Signature of Enrolling Officer			
(Ont Scar)				
TO BE COMPLETED BY ME	EDICAL OFFICER BEFORE ENROLMENT			
I have examined (Name)	Ol			
	intil for enrolment as a cadet in the National Cadet Corps.			
*				
Place	Signature			
Date:	Designation(Medical Officer)			
TO BE USED FOR	EXTENSION OF ENROLMENT			
	(See Rules 13)			
A. I agree to extend my enrolment for one year and an	m willing to fulfil the engagement made.			
* Place:				
Date:	Signature of Applicant			
Confirmed.	Signature of Approxim			
*				
Place:				
Date of Enrolment:	Signature of Commanding Officer			
	•			
*	r/ward for one year an am willing to fulfil the engagement made.			
Place:				
Date:	Signature of Parent/Guardian			
* Confirmed.				
Place:				
Date from which Extension Starts:	Signature of Principal			

Note: This form will be retained in the school in which the until is located.

Appendix 'A' to DG NCC NO. 19952/DG/NCC/CWS Dated 5 feb 91 FOR MEMBERSHIP OF THE NCC CADETS WELFARE SOCIETY (TO BE RDTAINED AT NCC GROUP HEADQUARTERS)

NOMINATION FORM SECTION-I

1.	1. I, Cadet(name in block Letters)			with(Name of the	a student of class		
2.	2. My Father/Mother/Guardian's occupation isper ann						
3.	I understand that I shall be of the above Society in the organised NC activity. I her quantum of assistance to be	ne event of partice eby accept that the	al or permanent disable ne decision of the Govern	ement sustained by me ning Body/Managing Co	while participating in an mmittee with regard to the		
4.	I hereby nominate the foll Body/Managing Committee event of my death while pa	of the above So	ciety, which will be fir				
Sr No		Age	Relationship with the Cadet	Permanent Address of the Nominee	Percentage of Financial Assistance payable		
(To	be filled by the cadet in his	own handwriting)					
5.	My membership in the Wel Division or Wing of the NC	•		ll be valid only till such	time I remain a cadet in the		
Dat	e:						
Pla	ce:			(Full Si	gnature of the Cadet)		

SECTION-II

Date:	
Place:	(Signature of PTO/ Head of Institution)
SEC	CTION-III
	fare Society under the terms & conditions and the rules in force ection 1 (4).
Date:	
Place:	(Full Signature of the Father/Mother/Guardian)
Witness	Witness
1. (Signature)	2(Signature)
Full Name & Address or Office Seal of the Witness	Full Name & Address or Office Seal of the Witness
Note: - The witnesses should be either gazetted officer/head	of institution /Associated NCC Officer/Sarpanch/Village Head.
	CTION-IV ubscription & enrolled as a member of the National Cadet Corps
Welfare Society During the Cadetship in the Junior/Senior	•
Date:	
Place:	(Signature of the OC Unit with Official Seal)
(To be f	CTION-IV filled by the NCC unit)
Date of despatch of the Nomination form to Group HQ	

Name:
Father Name:
D.O.B
Department:
College Roll No. / University Roll No
Class & Section
Mobile No.
Permanent Address with Parents Telephone No.:
E-mail Id: