FORM II NATIONAL CADET CORPS

JUNIOR DIVISION/WING ENROLMENT FORM (See Rules 7 and 11of NCC Act, 1948)

ATTESTED PP SIZE COLOR PHOTO

1. LETT	Name (IN BLOCK ERS)	
2. Birth	Nationality & Date of (DD/MM/YYYY)	
3.	Father's Name	
4.	Mother's Name	
5.	Permanent Address	
6.	Mobile/Land Line Telephone	
7.	Number e-mail id	
8.	Blood Group	
9.	Sex	
10.	Nearest Railway Station	
11.	Nearest Police Station	
12.	Educational qualifications & Marks in (%)	
13.	Identification Marks (at least two)	
14.	Have you ever been convicted by a criminal court & if so in What circumstances and what was the senter relevant documents.	nce? Attach

15.	Name of School/College and Stream (Arts/Science/ Commerce)	
16.	Willing to be enrolled and undergo training under the National Cadet Corps Act, 1948	
17.	NCC Unit to be enrolled in	
18.	Have you been enrolled in NCC earlier.If yes, Your Enrolment No.	
19.	Have you been dismissed from NCC/the Territorial Army/the Indian Armed Forces; Please	
20.	Provide details:- Next of Kin with address (with relationship) Telephone No. (O)/(R) (as applicable)	e)
21.	Banker's detail/IFSC Code :	
22.	Bank Acct No of Cadet/Parent	
23.	Aadhaar/UID No. (If allotted)	
24.	PAN Card No. (If allotted)	
Place:	:	
Date :		(Signature of the applicant

DECLARATION ON ACCEPTANCE FOR ENROLMENT

-	ers I have given to the questions in this form are se, and that I am willing to fulfil the engagement
	promise that I will honestly and faithfully ne rules and Regulation of the National Cadet bility.
on authorities for any compensation	romise that after enrolment, I will have no claim on in the event of injury due to accident during and while on YEP or any other such NCC tand I have no service liability.
Place: Date:	Signature of Applicant
DECLARATIO	N BY PARENT/GUARDIAN
-	answers given in this form are true and that no my son/daughter/wars is willing to fulfil the
son/daughter/ward, I will have no c event of any injury or death due	laim on authorities for any compensation in the to accident during training camps, courses, other such NCC events like RDC and IGC.
Place: Date:	Signature of Parent/Guardian
<u>C</u>	<u>ERTIFICATE</u>
Certified that the applicant and his conditions of enrolment.	s parent/guardian understand and agree to the
Place	
Date of Enrolment:	Signature of Enrolling Officer (Unit Seal)

CERTIFICATE

 Certified that the applicant understands and agree to the conditions of enrolme 	1.	Certified that the	applicant u	understands and	d agree to the	e conditions of	enrolmer
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*2. Certified that the applicant and his parent/guardian understand and agree to the conditions of enrolment.

Place: Signature of Enrolling Officer Date of Enrollment: (Unit Seal)

^{*} For Minors only. Score out in applicable portion.

TO BE USED FOR EXTENSION OF ENROLMENT (See Rules 13)

A. I agree to extend my enrolment for one year and am willing to fulfil the engagement made.					
Place: Date:	Signature of Applicant				
Confi	rmed				
Place: Date of Enrolment:	Signature of Commanding Officer				
B . I agree to extend the enrolment of my son/daughter/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				

INDENMITY BOND (FOR MINOR APPLICANTS ONLY)

To,

	ident	

In consideration of my ward NoName
being nominated either by the NCC authorities or at my own request as a participant in
any NCC camp (which includes Republic Day Camp and Independence Day Camp in
Delhi), Course, Adventure Training (including Army, navy and Air Force Wing activities,
as the case may be) and while traveling (in domestic/ international surface, air and water
transport) and attending Youth Exchange Programme (YEP) abroad, I undertake and
agree that neither I, nor my executors or administrators or other legal representatives
will make any claim against the Government or against NCC authorities including
officers, JCO's/ NCO's or their equivalents from Navy and Air Force, civilians, MT drivers
or against any other such person in the service of the Government, in respect of any
loss or injury – to the property or person, including injury resulting in death, due to any
reasons whatsoever which I may suffer, while or in consequence of my participation in
the above activities and I understand that no compensation will be paid by the
Government or NCC authorities including officers, JCO's/NCO's or their equivalents
from Navy and Air Force or Civilian MT drivers in respect of any such loss or injury and
I agree as to bind myself, my executors and administrators and other legal
representatives to indemnify the Government or NCC authorities including officers,
JCOs/NCOs or their equivalent from Navy and Air Force, civilian MT drivers or any
person in the service of Government against any claim which may be from any third
party against them or any of them arising out of any act of default on my part during or
in connection with the said camps, courses, adventure training, traveling and while on
Youth Exchange Programme or any other such NCC activities as may be organized from
time to time within or outside the Union of India.

Signature of Parent/Guardian Name Address

Witness

- Signature
 Name
 Address
- Signature
 Name
 Address

Place:

Date:

(NOTE: In case of SD applicant being a minor, Indemnity Bond applicable to Minor will be used)

MEMBERSHIP OF THE NCC CADETS WELFARE SOCIETY NOMINATION FORM SECTION-I

1. I	l, Cadet (name	in block	Letters)	S	on/Daughter of			
Shri (N	lame in block le	tters)		, a student of class	of			
(Name	of College/Sch	nool)		on my enrolm	nent With the			
NCC o	_	,		of the unit)				
apply for membership of the National Cadet Corps Cadets Welfare Society and hereby subscribe a sum of Rs. 4/- (Rupees Four Only) towards its membership fee.								
3003011	be a sam of No	ii (itapt	oco i odi orily)	towards no membership lee.				
2. I	My Father/Moth	er/Guard	dian's occupa	tion is	and the			
annual i	ncome of my fami	ly from	all sources is R	ds per	annum.			
Govern perman hereby the qua will be to 4. I determine	ing Body/Managhent disablement accept that the cantum of assistantinal and binding of the Government ined by the Government.	ing con sustained decision dec to be on me. e the for rning Bo	nmittee of the ed by me while of the Governing paid to me in the body/Managing Cody/Managing Cody/Ma	o financial assistance as determined above. Society in the eventer participating in an organised ing Body/Managing Committee on the event of permanent/particles) who will receive financial Committee of the above Societ the event of my death while participations.	t of partial or d NC activity. I with regard to al disablement assistance, as y, which will be			
	sed NCC activity:-		9 F (-)	μ	9			
Ser. No	Name of Nominee(s)	Age	Relationship with the Cadet	Permanent Address of the Nominee(s)	Percentage of Financial Assistance payable			
(To be	filled by the cade	t in his c	own handwriting	1)				

My membership in the Welfare Society and this Nomination Form will be valid only till

(Full Signature of the Cadet)

such time I remain a cadet in the Division or Wing of the NCC to which i have been enrolled

Date:

Place:

SECTION-II

<u> </u>					
Date:					
Place: (Signature of PTO/ Head of Institution)					
i idoc.	(Orginatare of Freda of Institution)				
	SECTION-III				
I am willing to allow my son/dau	ughter/ward (Name)				
•	nal Cadet Corps Cadet Welfare Society under the terms				
	of the Society. I also approve the nomination(s) made in				
Section I (4).	(,)				
()					
_					
Date:					
Place:	(Full Signature of the Father/Mother/Guardian)				
Witness	Witness				
1	2				
(Signature)	(Signature)				
Full Name & Address or	Full Name & Address or				
Office Seal of the Witness	Office Seal of the Witness				
Note: - The witnesses should be either gazetted officer/head of institution /Associated NCC					
Officer/Sarpanch/Village Head.					
SECTION-IV					
Received a sum of Rs. 4/- (Rupees four only) as one time subscription & enrolled as a					
member of the National Cadet Corps Welfare Society during the Cadetship in the					
Junior/Senior Division/Wing.					
Date:					
Place:	(Signature of the OC Unit with Official Seal)				
SECTION-V					
(To be filled by the NCC unit)					
Data of despatch of the Namination form to Cray LIC					
Date of despatch of the Nomination form to Group HQ					

SPECIMEN SIGNATURE FORM

		PHOTO
No Rank	Name	
of		_ School / College.
His/her three specimen signatures are as unde	PΓ:-	
Signature / Stamp of ANO	Sig / Stamp of Head of	Institutions

CO / OC Unit