FORM 1 NATIONAL CADET CORPS

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

1.	Name (IN BLOCK LETTER)	
2.	Nationality & Date of Birth (DD/MM/YYYY)	
3.	Father's/Guardian's Name	·····
4,	Mother's Name	
5.	Residential Address (Landmark, State, Distt Taluka, City/Vill, pin Code)	
6:	Mobile No.	
7.	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 sentence ? Attach relevant documents.	
15.	Name of School/College and Stream (Arts/Science/ Commerce).	
16.	Willing to be enrolled and undergo traning under the National Cadet Corps Act. 1948	
	and a reparation to the	

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 provide details.	
20.	Next of kin with address (with relationship) Telephone No. (O) ^(R) (as applicable).	
21.	Banker's detail/IFSC Code :	-
22.	Bank Acct No of Cadet/Parent	
23.	Aadhar/UID No. (if allotted)	
24.	PAN Card No. (IF allotted).	

Place	•••••••••••••••••••••••••••••	
Date :		

(Signature of the applicant)

DECLARATION ON ACCEPTANCE FOR ENROLMENT

- 1. I solemnly declare that the answer I have given to the questions in this form are true and that no part of them is false and that I am willing to fulfill the engagement made.
- 3. I further promise that after enrolment. I will have no claim on authorities for any compensation in the event of injury or death due to accident during training camps, courses, traveling and while on YEP or any other such NCC events like RDC. I understand I have no service liability.

Place	;	
Date	:	

(Signature of the applicant)

DECLARATION BY PARENT/GUARDIAN

- I solemnly declare that answers I have given to the question in this form are true and that on part of them is false, and that my son ward is willing to fulfill the engagement made.

I understand my don/ward has no service liability.

Place : Date :

Signature of Parent/Guardian

CERTIFICATE

2. Certified that applicant and his parent/guardian understand and agree to the ondition of enrolmen

Place :

Date Enrolment : (Unit Seal) Signature of Enrolling Officer

TO BE COMPLETED BY MEDICAL OFFICER BEFORE ENROLMENT

Place : Date :

TO BE USED FOR EXTENSION OF ENROLMENT/SERVICE

(See Rules 13)

a. I agree to extend my enrolment for one year and am willing to fulfill. I the engagement made.

Place : Date : Place : Date :

Signature of Applicant/Cadet

Signature of Commanding Officer

In consideration of my nomination either by the NCC authorities or at my own request as a participant in any NCC camp (which includes Republic Day Camp and Indepence Day Camp in Delhi), Course, Adventure Training (including Army, Navy & Air Wing activities as the case may be) and while travelling (in domestic/international surface, air, and water transport) and attending youth Exchange programmes abroad. I undertake and agree that neither I, nor my executors or administrators or other legal representative will make any claim against the Government or against NCC authorities including officers, JCOs/NCOs 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 what-so-ever which I my suffer, while or in consequence of my participation in the above activities and I understand that no compensation will be paid by the Government of NCC authorities including officers, JCOs/NCOs 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 bring myself, executors and administrators and other legal representative to indemnity the Government or NCC authorities including officers, JCOs/NCOs or their equivalents from Navy and Air Force, Civilians, MT drivers or any person in the service or Government against any claim which may be from any third party against them of any of them arising out of default on my part during or in course of adventure training travel 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.

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Signature of Applicant No., Rank and Name

Signature of parent/Guardian
Nama
Name
Address

Witness

- 1. Signature Name & Address
- 2. Signature Name & Address

Seal & Signature Head of the Institution

Countersigned by CO

FOR MEMBERSHIP OF THE CADET WELFARE SOCIETY APPENDIX 'A' DG NCC/POLICY LETTER No. 19552/DGNCC/CWS FT.05 FEB 91 (NOMINATION FORM)

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(To be retained at NCC Group HQ)

Section - 1

1. 1, Cadet (Name in block letters)	
Son of Shri (Name in block letters) a	
of class of (Name of College/School)	
on my enrolment with the NCC on date with 28 CG BN. NCC RAIGARH ap	oply for
membership of the NCC Cadets Welfare Society and hereby saubscribe a sum of Rs. 19/- (Rupees Fourtee	en only)
towards the membership fee.)	

3. I understand that I shall be entitled to Financial relief as determined by the Governing Body/Managing Committee of the above Society in the event of partial or permanent disablement sustained by me while participating in an organized NCC activity, I hereby accept that the decision of the Governing Body/Managing Committee with regard to the quantum of relief to be pad to me in the event of my partial/permanent disablement will be final and binding on me. I hereby nominate the following person / persons who will receive financial assistace as per the Share indicated and as determined by the Governing Body/Managing Committee of the above Society which will by final and binding on the following person(s) in the event of my/death/disablement while participating in an organized NCC activity :-

S. No.	Name of the Nominees (in black letters	Nominee (Age)	Relationship with the cadet	Permanent address of the nominee	Percentage of Financial Assistance payable
1.					
2.		.41. 			

(to be filled by the cadet in own hand writing)

1. My membership in the Welfare Society and this Nomination Form will be valid only till such time. I remain a cadet in the Division of the NCC to which I have enrolled.

Date :

Place :

6 Section -II

Place : Date :

(Signature of Head of Institution)

Section - III

I am willing to allow my son / ward Name to become a member of the NCC Cadets Welfare Society under the terms & conditions and rules in foce the Society. I also approve of the nomination made in Section 1 (4).

Place :

Date :

(Full Signature farther/Mother/Guardian) with complete address

Witness

1.

(Signature)

2.(Signature)

(Full name and address of office seal of the witness)

Note :- The witness should be either gazetted Officer, Head of Institution / NCC Part time Officer Sarpach / Village Head

Section - IV

Received a sum of Rs. 14/- (Rupees fourteen only) as once time subscription and enrolled as a member of the NCC Cadets Welfare Society during the cadetship in the Junior / Senior Division/Wing.

Place : Raigarh

Date :

Commanding Officer 28 CG Bn NCC, Raigarh

Section - V (To be filled in by the NCC Unit)