Appendix 'B' (Revised 2013) FORM II NATIONAL CADET CORPS JUNIOR DIVISION/WING ENROLMENT FORM (see Rules 7 and 11 of NCC Act, 1948) ١. Name (IN BLOCK LETTERS) ATTESTED PP SIZE COLOUR PHOTO 2 Nationality & Date of Birth (DD/MM/YYYY) 3. Father's Name AST MIDDLE IRST 4. Mother's Name 5. Permanent Address Mobile /Land Line Telephone 6. Number 7. E-mail ID Blood Group 8. 9. Sex Nearest Railway Station 10. 11. Nearest Police Station **Educational Qualifications** 12. & Marks in (%) 13. Identification Marks (at least two) Have you ever been convicted by a criminal court & if so in What circumstances and what Was the sentence? Attach relevant documents. Name of School/College and 15. 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.

(with relationship) telephone No. (O) / (R) (as applicable)

Next of Kin with address

Provide details:-

Have you been dismissed from NCC/the Territorial Army/the Indian Armed Forces; Please

21. Banker's detail/FSC Code: 22. Bank Acct No of Cadet/Parent

Place:-

Date

20.

DECLARA	-2-	
DECLARATION	ACCEPTANCE FOR	
	ACCEPTANCE FOR	ENROLMENT

	DECLARATION ACCEPT	ANCE FOR ENDOLMENT					
I solemnly declare that the answers I have given to the questions in this from are true and that no part of them is false, and that I am willing to fulfill the engagement made.							
2. I Rules and Regu		onestly and faithfully serve my country and abide by the					
any compensati	ion in the event of injury or death due to accider such NCC events like RDC and IDC. I un	nat after enrolment, I will have no claim on authorities for ident during training camps, courses, traveling and while on derstand have no service liability.					
Place : Dated:	Signature of ANO:-	Signature of the applicant					
DECLARATION BY PARENT/GUARDIAN							
 I solemnly declare that the answers given in this from are true and that no part of them is false, and that my Son/Daughter/ward is willing to fulfill the engagement made. 							
2. I							
Place : Dated:	CERTIFICATE	Signature of Parent/Guardian					
Certified that the applicant and his parent/guardian understand and agrees the condition of enrolment.							
Place: Date of Enroln (Unit seal)	nent:	Signature of Enrolling Officer)					
	TO BE COMPLETED BY THE MEDIC						
1. I have examined (Name)							
Place : Dated :		Signature of Medical Officer Designation:					
	TO BE USED FOR EXTE	NSION OF ENROLMENT					
A. I agree to extend my enrolment for one year and am willing to fulfill the engagement made.							
Place: Date:		Signature of the Applicant					
Confirmed Place:		Signa of the Officer Commanding					
Date: B. I agree to extend the enrolment of my son/doughtier/ward for one year and am willing to fulfill the agreement made.							
Place : Date :		Signature of Parent/guardian)					
Confirmed Place:		CIT					
Date from w	hich extension starts	Signature of Headmaster					

Section - II Place: (Signature of Head of Institution) Date: Section - III I am willing to allow my son/daughter/ward name ______ to become a member of the NCC Cadet Welfare Society under the terms & conditions and rules in force of the society. I also approve of the nomination made in Section 1(4). Place: (Full signature of the father/Mother/ Guardian with complete address) Date: Witness: Witness: (Signature) (Signature) (Full name address of office (Full name address of office seal of the Witness) seal of the Witness Note:- The witness should be either Gazetted Officer/Head of Institution/ ANO/Sarapanch/Village Head. Section - IV Received a sum of Rs.10/-9Rupees Ten only) as one time subscription and enrolled

a member of the NCC Cadet Welfare Society during the cadetship in the Junior/Sen Wing.

Place:

(Signature of the OC with Office Seal)

Date:

Section - V

Date of dispatch of the Nomination Form Group HQ_

Note:- The Nomination Form will be printed on both sides of a single leaf.

Appendix 'B'
(Refers to para 3 of DGNCC letter 1995/DGNCC/CWS dated 28 Apr 2000 as amended)

NOMINATION FORM FORMEMBERSHIP OF THE NCC CADETS WELFARE SOCIETY (To be retained at NCC Group HQ) Section - I

	 I Cadet (Name in Block Son /daughter of Sri (Name Student of class 	in Bloc	ck Letters)	llege/School				
	of my enrolment with the NCC on (Date) with (Name of the Unit)1(Odisha Girls Bn NCC, Bhubaneswar of Rs.10/-(Rupees Ten only)towards its membership fees.							
	My father/Mother/Guar Annual income of my family	rdian's from al	occupation is I sources is Rs	per	annum.			
	3. I understand that I shall be entitled to financial relief as determined by 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 Govt Body/Managing Committee With regard to the quantum of relief to be paid to me in the event of my partial/Permanent disablement will be final and binding on me.							
4. I hereby nominated the following person/persons who will receive financial assistance as per the share indicate and as determined by the Governing Body/Managing Committee of the above Society. Which will be final and binding on the following person (s) in the vent of my death while participating in an organized NCC activity:								
0	Name of the nominee/ Nominees (in block letters)	Age	Relationship With the cadet	Permanent Address of The nominee	Percentage Financial Assistance payable			
	(To be filled b	y the C	Cadet in own hand	writing)				
5. My membership in the Cadets Welfare Society and this Nomination Form will be valid only till such time I remain a cadet in the Division or Wing of the NCC to which I have been enrolled.								
D	oate:		(Full Sig	nature of the Ca	det)			
P	lace:							

SI No