FORM I

NATIONAL CADET CORPS

ATTESTED PP SIZE COLOR PHOTO

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

1.	Name (IN BLOCK LETTERS)																		
2.	Nationality & Date of Birth (DD/MM/YYYY)]									
3.	Father's/Guardian's Name	F	I	R	S	T	М	I	D	D	L	E		L	Α	S	T		
4.	Mother's Name	F	I	R	S	Т	М	I	D	D	L	E		L	Α	S	Т		\exists
												<u> </u>							
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		1	_	c	c				I		N 4	۸	В	V	c			
12.	Educational qualifications & Marks in (%)	С	L	Α	S	S						М	Α	R	K	S			
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.			<u> </u>]		<u> </u>	<u> </u>	<u> </u>							

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	Y		N																		
17.	NCC Unit to be enrolled in																					
18.	Have you been enrolled in NCC earlier. If yeas, Your Enrolment No.	Υ		N																		
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.	Aadhaar/UD No. (If allotted)																					
24.	PAN Card No. (If allotted)																					
	Place: SIGNATURE OF APPLICANT) Date: @Note: Form II given in NCC Act & Rules has been suitably midified to capture all data required.																					
DECLARATION ON ACCEPTANCE OF ENROLMENT 1. I solemnly declare that the answers 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.																						
Rules & F	Regulations of the National Cade by the Commanding Officer fron	et Co	rps	that	l w	nise vill, 1	tha to t	it I w	ill he	ones of m	stly a	nd f pility	aithf , att	ully s end	serv all p	e my arad	y cou des a	intry and o	an cam	d ak ips	oide as r	by the nay be
	pensation in the event of injury or such NCC events like RDC and II	or de	ath	due	to a	acci	den	t dur	ing	traiı	ning	cam	ment ips, c	, I wi	ill ha	ave i	no cla elling	aim g and	on a	autl hile	nori on	ties for YEP or
Place: Date:											 (S	igna	ture	of th	ie A		 cant)					

DECLARATION BY PARENTS / GUARDIAN

1.	I solemnly declare that the answers given in this	s form are true and that no part of them is false and that my son / daughter $% \left(\left(1\right) \right) =\left(1\right) \left(\left(1\right) \right) $
/ ward:	s is willing to fulfill the engagement made.	
2.	Ifu	rther promise that after the enrolment of my son / daughter / ward, I will
	o claim on authorities for any compensation in s s, travelling and while on YEP or any other such N	the event of any injury or death / due to accident during training camps,
Place:		
Date: _		(Signature of Parents / Guardian)
		<u>CERTIFICATE</u>
1.	Certified that the applicant understands and a	grees to the conditions of enrolment.
*2.	Certified that applicant and his / her parents /	guardian understand and agrees to the conditions of enrolment.
Place:		
Date of	f Enrolment	(Signature of Enrolling Officer)
(Unit S	eal)	

*For Minors only. Score out in applicable portion.

TO BE COMPLETED BY MEDICAL OFFICER BEFORE ENROLMENT

I have examined (Name)	on (date)
and consider him / her fit / unfit for enrolment as a Cadet in the Nati	
Place:	Signature
Date:	Designation (Medical Officer)
	Stamp
TO DE 1105D FOR EVITAVO	
TO BE USED FOR EXTENSIO (See Rules :	
A. I agree to extend my enrolment for one year and am willing	to fulfill the engagement made
Tagree to extend my emonitered one year and am willing	to runni the engagement made.
Place	
Place: Date:	(Signature of the Applicant)
	(Signature of the Applicant)
Confirmed	
Place:	
Date:	(Signature of Commanding Officer)
B. I agree to extend the enrolment of my son / daughter / ward	d for one year and am willing to fulfill the engagement made.
Place:	
Date:	(Signature of Parent / Guardian)
Confirmed	
Place:	
Date from which extension starts	(Signature of Head Master)
NOTE:- This form will be retained in the College/school in which the	unit is located.

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Annexure to Form I (Application for enrolment)

INDEMNITY BOND

То						
The Pre	esident of India					
			Name			
	•			•	(which includes Republic Day Cam	
•	·	**	• · · · · · · · · · · · · · · · · · · ·		Air Force Wing activities, as the cast attending Youth Exchange Progr	•
	_				ther legal representatives will ma	
			•		s or equivalents from Navy and Air	
	_	_	_		t, in respect of any loss or injury	
	•				nich I may suffer, while or in consec	
of my	participation in t	he above activities and I	understand that no compe	ensation v	vill be paid by the Government o	r NCC
	_		•		e or civilian MT drivers in respect	•
					other legal representatives to inde	
		_		-	ts from Navy and Air Force, civilia	
				-	m any third party against them or	-
			_		aid camps, courses, adventure tra ay be organized from time to time	•
	ide the Union of I	9 9	e or any other such NCC activ	villes as m	ay be organized from time to time	WILIIII
or outs	ide the officir of t	nuia.				
				Signatur	e of Applicant	
					÷	
					oup:	
Witnes	<u>s</u>					
1.	Signature	:		Signatur	e of Parent / Guardian	
	Name	:		Name	:	
	Address	:			Address:	
2.	Signature	:				
	Name	:				
	Address	:				
Date:						
Place:						

(Note: In case of SD Applicant being minor, Indemnity Bond applicable to Minor will be used)