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

1. What is your Name? (in block letters)

2. What is your parent/guardian’s name & address?

3. Are you a citizen of India, or a subject of Nepal?

4. What is your village, Tehsil or Taluka & District?

5. What is your Post Office?

6. What is your Railway Station?

7. What are your educational qualification?

8. What is your age & Date of birth?

9. Have you ever been convicted by a criminal court and if so in what circumstances and what was the Sentence?

10. In which college are your now studying?

11. Are you willing to be enrolled under the National Cadet Corps Act, 1948?

12. In which unit do you desire to be enrolled?

13. Are you willing to undergo service training as Specified in the Act and the rules made thereunder?

14. Are you willing to serve in the National Cadet Corps Until discharged as provided in the act?

15. Have you ever previously applied for enrolment Under the act, and if so with what result?

16. Have been dismissed from the National Cadet corps, The Territorial Army or the Indian Armed forces?

* Next of kin with address (with relationship)

Telephone No. (O)/(R) (as applicable)

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

Signature of Applicant

Place:

Date:

Note:
DECLARATION ON ACCEPTANCE FOR 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 fulfil the engagement made.

2. I..............................................................................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.

3. I..............................................................................further promise that after enrolment, I will have no claim on authorities for any compensation in the event of injury due to accident during training camps, courses, travelling and while on YEP or any other such NCC events like RDC and IDC. I understand I have no service liability.

Place: ..............................................................................
Date: ..............................................................................

Signature of Applicant

DECLARATION BY PARENT/GUARDIAN

1. I solemnly declare that the answer given in this form are true and that no part of them is false, and that my son/daughter/ward is willing to fulfil the engagement made.

2. I..............................................................................promise that after enrolment of my son/daughter/ward, I will have no claim on authorities for any compensation in the event of any injury or death due to accident during training camps, courses, travelling and while on YEP or any other such NCC events like RDC and IDC.

Place: ..............................................................................
Date: ..............................................................................

Signature of Parent/Guardian

CERTIFICATE

Certified that the applicant and his parent/guardian understand and agree to the conditions of enrolment.

Place: ..............................................................................
Date of Enrolment: ..............................................................................

Signature of Enrolling Officer

(UNI SEAL)

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 National Cadet Corps.

Place: ..............................................................................
Date: ..............................................................................

Signature ..............................................................................
Designation ..............................................................................

(Medical Officer)

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 ..............................................................................

B. I agree to extend the enrolment of my son/daughter/ward for one year and am willing to fulfil the engagement made.

Place: ..............................................................................
Date: ..............................................................................

Signature ..............................................................................

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. I, Cadet(name in block Letters).......................................................................................................................... Son/Daughter of Shri (Name in block letters) ............................................................................................................ a student of class ................................................................. of (Name of College/School)........................................................................................................................................on my enrolment With the NCC on (Date) ......................................................................................................................with(Name 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.

2. My Father/Mother/Guardian’s occupation is ..........................................................and the annual income of my family from all sources is Rs....................................................per annum.

3. I understand that I shall be entitled to financial assistance 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 organised NC activity. I hereby accept that the decision of the Governing Body/Managing Committee with regard to the quantum of assistance to be paid to me in the event of permanent/partial disablement will be final and binding on me.

4. I hereby nominate the following person(S) who will receive financial assistance, 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 event of my death while participating in an organised NCC activity:-

<table>
<thead>
<tr>
<th>Srl. No.</th>
<th>Name of Nominee/ Nominees (In Block Letters)</th>
<th>Age</th>
<th>Relationship with the Cadet</th>
<th>Permanent Address of the Nominee</th>
<th>Percentage of Financial Assistance payable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(To be filled by the cadet in his own handwriting)

5. My membership in the 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.

Date:

Place: (Full Signature of the Cadet)
SECTION-II

Date:  
Place:  
(Signature of PTO/ Head of Institution)

SECTION-III

I am willing to allow my son/daughter/ward Name ........................................................................................................... to become a member of the National Cadet Corps Cadet Welfare Society under the terms & conditions and the rules in force of the Society. I also approve the nomination(s) made in Section 1 (4).

Date:  
Place:  
(Full Signature of the Father/Mother/Guardian)  
Witness  
Witness

1. ........................................................................  
   (Signature)  
   Full Name & Address or Office Seal of the Witness

2. ........................................................................  
   (Signature)  
   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.

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-IV  
(To be 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: .....................................................................................................................................