## FORM I NATIONAL CADET CORPS

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

ATTESTED PP SIZE COLOUR PHOTO

| 1.  | Nan   | ne (       | IN E          | BLO        | CK       | LE          | ТТЕ   | RS  | 3) |  |   |  |  |  |   |  |  |  |  |  |  |              | - |   |  |   |             |  |                       |  |
|-----|---|------------|---------------|------------|----------|-------------|-------|-----|----|--|---|--|--|--|---|--|--|--|--|--|--|--------------|---|---|--|---|-------------|--|-----------------------|--|
|     |   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  | L |             |  |                       |  |
|     |   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
|     |   |            |               |            |          |             |       |     |    |  | 1 |  |  |  |   |  |  |  |  |  |  |              | _ | _ |  |   |             |  |                       |  |
| 2.  | Nati<br>(DD   | ona<br>/MN | lity<br>/I/YY | & D<br>/YY | ate<br>) | of E        | 3irth | า   |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
| 3.  | Fath  | ners       | /Gu           | ardi       | an'      | s Na        | ame   | Э   |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
|     |   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   | $\mp$       |  |                       |  |
| 4.  | Mother's Name   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
|     |   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
|     |   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
| 5.  | Residential Addresss<br>(Landmark, State, Dist,<br>Taluka, City/Vill, PIN Code) |            |               |            |          |             | 1     |     |    |  |   |  |  |  |   |  |  |  |  |  |  | <del>-</del> |   |   |  |   |             |  |                       |  |
| 6.  | Mob   | oile       | No.           |            |          |             |       |     |    |  |   |  |  |  | 1 |  |  |  |  |  |  |              |   |   |  | 1 | <del></del> |  | $\frac{\perp}{\perp}$ |  |
|     |   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
| 7.  | E-m   | ail I      | D             |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   | I           |  |                       |  |
|     |   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
| 8.  | Bloc  | od G       | Grou          | p          |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
| 9.  | Sex   |            |               |            |          |             |       |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
| 10. | Nea   | res        | t Ra          | ilwa       | ıy S     | tatio       | on.   |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   | T           |  |                       |  |
| 11. | Nea   | res        | t Po          | lice       | Sta      | itior       | 1     |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |
| 12. | Edu<br>& M  |            |               |            |          | icat        | ion   |     |    |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   | I           |  |                       |  |
| 13. | lder<br>two   |            | atio          | n M        | lark     | s <b>(a</b> | ıt le | ast | ŧ  |  |   |  |  |  |   |  |  |  |  |  |  |              |   |   |  |   |             |  |                       |  |

| 14.   | Have you ever been convicted By a criminal court & if so in what circumstances and what was the sentence? Attach relevant documents. |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
|-------|--|--------|-------------|-------------|-------------|-------------|-------------|-------------|---|-------------|-------------|-----|-------------|-------------|------------------|-------------|-------------|------------------|------------------|--------|-------------|
| 15.   | and Stream (Arts/Science/Commerce)   | C<br>S | A<br>O<br>C | R<br>L<br>I | V<br>L<br>E | A<br>E<br>N | T<br>G<br>C | I<br>E<br>E | В | A<br>O<br>A | I<br>F<br>U | Т   | C<br>A<br>O | H<br>R<br>N | 0<br>T<br>0<br>C | W<br>S<br>M | G<br>O<br>E | U<br>A<br>U<br>N | L<br>N<br>S<br>C | E<br>D | ]<br>-<br>- |
| 16.   | Willing to be enrolled and undergo training under the National Cadet Corps Act, 194  | Y<br>8 |             |             | N           |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        | -           |
| 17.   | NCC Unit to be enrolled in   | 1      | (           | }           | 0           | Α           |             | В           | N | 1           | 1           | С   | С           | F           | ) /              | 1 N         | 1 \         | \ J              | I                |        |             |
| 18.   | Have you been enrolled in NCC earlier if yes, Your enrolment No.   | Y      | ,           |             | N           |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
| 19.   | Have you been dismissed from NCC/the Territorial Army/ the Indian Armed Forces. Please provide details.                              | ′      |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
| 20.   | Next to Kin with addresss<br>(with relationship) Telephone<br>No.(O)/(R) as applicable   |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
| 21.   | Bankers detail/IFSC Code   |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
| 22.   | Bank Acct No.of<br>Cadet/Parent.   |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
| 23.   | Aadhar /UID No. (if allotted)  |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
| 24.   | PAN Card No.(if allotted)  |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
|       |  |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             |                  |                  |        |             |
| Place | :  |        |             |             |             |             |             |             |   |             | (S          | ign | atur        | e of        | the              | apı         | olica       | <br>ant)         |                  |        |             |
| Date  | :  |        |             |             |             |             |             |             |   |             |             |     |             |             |                  |             |             | -                |                  |        |             |

## **DECLARATION ON ACCEPTANCE OF ENROLMENT**

| 1.<br>of then   | I solemnly declare that the answers I have given to make the interpretable in the solution of the solution is false and that I am willing to fulfill the engagement | ·   |
|-----------------|---|---|
|                 | Ipro<br>ry and abide by the Rules & Regulations of the Nation<br>d all parades and camps as may be required by the Co   | al Cadet Corps that I will, to the best my ability, |
| course          | I fu<br>on authorities for any compensation in the event of in<br>es, traveling and while on YEP or any other such NCC<br>e liability.                              | ury or death due to accident during training camps  |
| Place           | :   | Signature of the applicant Date:                    |
| Date            |   | SENT/OLIABBIAN                                      |
|                 | DECLARATION BY PAR  | EENT/GUARDIAN                                       |
| 1.<br>them is   | I solemnly declare that the answers I have given to is false and that my son/daughter/ward is willing to ful  | ·   |
| to acci         | I praughter/ward, I will have no claim on authorities for arcident during training camps, courses, traveling and wand IDC.  | y compensation in the event of injury or death due  |
| Place           |   | Signature parent/Guardian                           |
| Date:           |   |   |
|                 | <u>CERTIFIC</u>   | ATE   |
| 1.<br>enrolm    | Certified that the applicant and his parent/guardian ment.  | understand and agree to the conditions of           |
| Place<br>Date o | of Enrolment:   | Signature of Enrolling Officer                      |

## TO BE COMPLETED BY MEDICAL OFFICER BEFORE ENROLMENT

|   | I have examined Name)                             |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|
| and consider him/her fit/ unfit for enrolment as a cadet in the national Cadet Corps. |   |  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |
| Place   | :   | Signature  |  |  |  |  |  |  |
| Date  |   | Designation  |  |  |  |  |  |  |
| Dale  | •   | (Medical Officer)                                  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |
|   | TO DE 110ED FOR EVERY                             |  |  |  |  |  |  |  |
|   | <u>TO BE USED FOR EXTEN</u><br>( See Ru           | <u> </u>   |  |  |  |  |  |  |
| Α.  | I agree to extend my enrolment for one year and a | om willing to fulfill the engagement made          |  |  |  |  |  |  |
| Λ.  | ragree to extend my emorment for one year and a   | an willing to famili the engagement made.          |  |  |  |  |  |  |
| Place   | :   |  |  |  |  |  |  |  |
| Date  |   | Signature of applicant                             |  |  |  |  |  |  |
| Confir  | med   |  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |
| Place<br>Date   |   | Signature of Commanding Officer                    |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |
| В.  | I agree to extend the enrolment of my son/daught  | er/ward for one year and am willing to fulfill the |  |  |  |  |  |  |
| engag   | ement made.                                       |  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |
| Place   | :   | Signature of Parent/Guardian                       |  |  |  |  |  |  |
| Date  | :   |  |  |  |  |  |  |  |
| Confir  | med   |  |  |  |  |  |  |  |
| Place   |   | Signature of Headmaster                            |  |  |  |  |  |  |
|   |   | Orginature of Froduction                           |  |  |  |  |  |  |
| Date fi   | om which extension starts                         |  |  |  |  |  |  |  |

Note: This form will be retained in the College/school in which the unit is located.