#### FORM I NATIONAL CADET CORPS

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

ATTESTED PP SIZE COLOR PHOTO

1.	Name (IN BLOCK LETTERS)	
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 (%)	CLASS- MARKS- I
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 training under the National Cadet Corps Act, 1948	YN
17.	NCC Unit to be enrolled in	
18.	Have you been enrolled in NCC earlier.If yes, Your Enrolment No.	YN
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/UID No. (If allotted)	
24.	PAN Card No. (If allotted)	
Place:		
Date : _		(Signature of the applicant)

#### **DECLARATION ON ACCEPTANCE FOR ENROLMENT**

1. is false	I solemnly declare that the answers I have given to the questions in this form are true and that no part of them, and that I am willing to fulfill the engagement made.
	I promise that I will honestly and faithfully serve my country and abide by les & Regulations of the National Cadet Corps and that I will, to the best of my ability, attend all parades and as may be required by the Commanding Officer from time to time.
	I, further promise that after enrolment, I will have no claim on authorities for mpensation in the event of injury or death due to accident during training camps, courses, traveling and while on any other such NCC events like RDC, SNIC/NIC, TSC/VSC/NSC and Adventure Activities.
Place:	(Signature of the applicant)
Date:	DECLARATION BY PARENT/GUARDIAN
1. son/daı	I solemnly declare that the answers given in this form are true and that no part of them is false and that my ughter/ward is willing to fulfill the engagement made.
	I promise that after the enrolment of my son/daughter/ward, I will have no claim on ties for any compensation in the event of any injury or death due to accident during training camps, course, g and while on YEP or any other such NCC events like RDC and IDC.
3.	I understand my son/daughter/ward has no service liability.
4. son/wa	I promise to make good the prorata residual cost of clothing items issued if my rd does not complete two years of NCC training.
Place:	(Signature of the Parent/Guardian)
Date:	
	<u>CERTIFICATE</u>
1.	Certified that the applicant understands and agrees to the conditions of enrolment.
2.	Certified that the applicant and his parent/guardian understand and agree to the condition of enrolment.
Place:	
Date of	Enrolment: (Signature of Enrolling Officer/ANO/CT)
	TO BE COMPLETED BY MEDICAL OFFICER BEFORE ENROLMENT
vide G	I have examined (Name) on (date) as per medical standards laid down OI letter No dated (see • below) and consider him/her Fit/Unfit for ent as a Cadet in the National Cadet Corps.
2.	His/her blood group is
Place: Date :	Signature Designation (Medical Officer)
	MCI Registration No
	No. 0162/49/NCC dated 19 Mar 1949 (for SD (Army) & (Air)

- No. 0162/49/NCC dated 19 Mar 1949 [for SD (Army) & (Air)
  No. 0162/49/NCC dated 19 Mar 1949 [for JD]
  No. 0384/50/NCC dated 10 Mar 1950 [for SW]
  No. 0630/52/NCC/1255-B/D (IS&MED) dated 29 Mar 1952 [for SD Naval Wing]

#### **CERTIFICATE**

- 1. Certified that the above applicant agrees to the terms/conditions of Enrolment voluntarily.
- 2. Certified that this school/college/Institution agrees to fulfill the terms and conditions of engagement of NCC unit under the NCC Act in the school/college/Institution.

	CONFIRMED	(Signature of Principal/Head of School)
Place :		
Date:		(Signature of the OC Unit with office seal)

Annexure to Form I (Application for enrolment)

#### **INDEMNITY BOND**

То

The President of India

In consideration of my being nominated either by the NCC authorities or at my own request as participant in any NCC Camp (which includes Republic Day camp and Independence Day camp in Delhi), Course, Adventure Training (including Army, Navy & Air Wing activities, as the case may be) and while traveling (in domestic/international surface, air and water transport) and attending Youth Exchange Programme abroad, I undertake and agree that neither I, nor my executors of administrators or other legal representatives will make any claim against the Government or against NCC authorities including officers, JCO's/NCO's or their equivalents from Navy and Air Force/Civilians, MT Drivers or against any other such person in the service of the Govt in respect of any loss or injury to the Property or person, including injury resulting in death, due to any reasons whatsoever which I may suffer, while or in consequence of my participation in the above activities and I understand that no compensation will be paid by the Government or NCC authorities including officers, JCO's/NCO's 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 bind myself, my executors and administrators and other legal representative indemnify the Govt or NCC authorities including Officers JCOs/NCOs or their equivalents from Navy and Air Force Civilians or any person in the service of Government against any claim which may be from any third party against them or any of them arising out of any act of default on my part during or in connection with the said camps, courses, Adventure Training, traveling 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.

<u>Witne</u>	ess_	(Signature of Applicant) No
(1)	Signature Name Address	
(2)	Signature Name Address	Name
Place	:	
Date:		

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

## TO BE USED FOR EXTENSION OF ENROLMENT (See Rule 13 of NCC Act)

A.	I agree to extend the enrolment for	or one year and am willir	ng to fulfill the engagement made.
Place:			
Date:			(Signature of Cadet)
В	TO BE COMPLETE	ED BY MEDICAL OFFIC	ER BEFORE ENROLMENT
	I have examined (Name) date tter No date ent as a Cadet in the National Cadet Co	ed (see	(date) as per medical standard laid down vide • below) and considered him/her Fit/Unfit fo
2.	His/her blood group is		
Place: Date:	No. 0162/49/NCC dated 19 Mar 1949 No. 0162/49/NCC dated 19 Mar 1949 No. 0384/50/NCC dated 10 Mar 1950 No. 0630/52/NCC/1255-B/D (IS&MED	[for JD] [for SW]	Signature Designation (Medical Officer)  MCI Registration No
		AGREED	
C.	I agree to further extension of one year	ar for enrolment into IInd	year.
Place: Date:			(Signature of Enrolling Officer/ANO/CT)
		CONFIRMED	
			(Signature of Commanding Officer)

**Note**: This form will be filled in duplicate under the supervision of the Commanding Officer. Photo will be pasted only on original and duplicate. Original form will be maintained at the Unit, while the duplicate will be forwarded to Gp HQ.

#### **NOMITANTION FORM**

# FOR MEMBERSHIP OF THE CADETS WELFARE SOCIETY (To be retained at NCC Group HQ) Section – I

1. letters)	I, Cadet (name in block letter	s) a student o	of class	son/daughter o	of Shri (name in block me of college/school)
		on my enrolment with	the NCC on (dat	e)	with (name of
the unit	), ap <sub>l</sub>	ply for membership of the	NCC Cadets W	/elfare Society a	and hereby subscribe
a sum F	Rs (Rupees		only) toward	ds its membership	fee.
2. family fr	My father/Mother/Guardian's	occupation is Per annum		and the a	nnual income of my
3. Commit an orga the qua	I understand that I shall be tee of the above society in the inized NCC activity. I hereby a ntum of relief to be paid to me	e entitled to financial re event of partial or perm ccept that the decision or in the event of my partial	elief as determine anent disablement the Governing Bo permanent disable	t sustained by me ody/Managing Con ement will be final	while participating in nmittee with regard to and binding on me.
	I hereby nominate the following determined by the Governing Edwing person(s) in the event of	Body/Managing Committe	e of the above So	ciety, which will be	er the share indicated e final and binding on
<u>Ser</u> <u>No.</u> 1.	Name of the nominee(s) (In Block Letters)	Age Relationship Cadet		nanent address e nominee	Percentage of financial Assistance payable
2.					
3.					
	(То	o be filled by the cadet <u>Sectior</u>		ing)	
5. cadet in	My membership in the Welfa			be valid only till	such time I remain a
Place:					
Date:			Full Sign	ature of the Cadet	_ :
Place:					
Date:		Section		e of PTO/Head of	Institution)
	I am willing to allow my s r of the NCC Cadets Welfare e of the nomination made in Se		e) s & conditions and	d rules in force o	to become a f the Society. I also
Place:				Father/Mother/Guass	
Date:				<b></b>	
<u>Witnes</u>	<u>s</u>		Witness		
1. Signa	ature		2. Signature		

(Full Name and address or office seal of the witness)

Note: The witnesses should be either gazetted officer, head of Institution/NCC Part time Officer/Sarpanch/Village Head.

#### Section IV

			only) as one time subscription and cadetship in the Junior/Senior Division/Wing.
Place:			
Date:			(Signature of the OC Unit with office seal)
		Section V	
		(To be filled in by the NC	CC Unit)
Date of c	dispatch of the Nomination Form to I	NCC Group HQ	

# NOMITANTION FORM FOR MEMBERSHIP OF THE CADETS WELFARE SOCIETY (To be retained at NCC Group HQ)

#### Section - 1

1. I, ( letters)	Cadet (name in block l	etters)	a student of	f class	_son/dau	ughter of Shoot of (name o	ri (name in bloof f college/schoo	ck ol)
	olment with the NCC or ership of the NCC C				unit) a sum	Rs	I app (Rupe	oly es
2. My family from	/ father/Mother/Guard	ian's occup	ation is Per annum.		and	the annua	I income of n	ny
Committee an organize	understand that I sha of the above society in d NCC activity. I here n of relief to be paid to	n the event by accept th	of partial or permanat the decision of	nent disablement s the Governing Bod	sustained y/Managi	by me while ng Committe	e participating ee with regard	in to
	I hereby nominate that as determined by the following person(s)	ne Governin	g Body/Managing	Committee of the a	above So	ciety, which	will be final ar	
	ne of the nominee(s) Block Letters)		Relationship with he Cadet	Permanent ad of the nomine			ge of financial ce payable	<u>Í</u>
2								
3								
		(To be fill	led by the cadet in	n own hand writing	a)			
		(	Section		57			
4. cadet in the	My membership in the Division or wing of the				be valid	only till such	ո time I remain	ı a
Place: Date:					(Full Sigr	nature of the	: Cadet)	
Dlass				S	ignature	of PTO/Hea	d of Institution)	)
Place: Date			Section	III				
members o	am willing to allow not the NCC Cadets We the nomination made in	elfare Socie	ty under the terms					
Place:				Full signature of Fa				
Date:			-					
<u>Witness</u> 1. Signature	)			<u>Witness</u> 2. Signatu	ire			

(Full Name and address or office seal of the witness)

Note: The witnesses should be either gazetted officer, head of Institution/NCC Part time Officer/Sarpanch/Village Head.

### Section IV

enrolled	Received a sum of Rsd as a member of the NCC Cadets We	_ (Rupees elfare Society during the cad	only) as one time subscription and detship in the Junior/Senior Division/Wing.		
Place: Date:			(Signature of the OC Unit with office seal)		
	Section V				
	(to be filled in by the NCC Unit)				
Date of dispatch of the Nomination Form to Group HQ					