Appendix- 'A' (Revised 2013)

FORM-II NATIONAL CADET CORPS

NATIONAL CADET CORPS Attested PP				
5		rm (See Rules 7 and 11of NCC Act, 1948)	Size Color	
1.	Name (In Block Letters)		Photo	
2.	Nationality & Date of Birth (DD/MM/YYYY)			
3.	Father's/Guardian's Name			
4.	Mother's Name			
5.	Permanent Address (Vill, PO, PS, Dist. State, 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(%)	C L A S S - M A R	KS	
13.	Identification Marks (at least two)			
14.	Have you ever been convicted by A criminal court & if so in what Circumstances and what was th sentence? Attach relevant document	nts.		
15.	Name of School /College and Streat (Arts/Science/Commerce	m		

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 yes, Your Enrolment No.	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.	Adhere/UID No.		
24.	PAN Card No. (If allotted)		
Place			
Date:			(Signature of the applicant)

COUNTERSIGNED BY HEADMASTER/PRINCIPAL

FOR MEMBERSHIP OF THE NCC CADETS WELFARE SOCIETY (TO BE RETAINED AT NCC GROUP HEADQUARTERS) NOMINATION FORM SECTION-I

1. I, Cadet (name in block L	etters)			Son/Daugh	nter
of Shri (Name in block letters)					of
(Name of College/School)				on my enrolme	
the NCC on (Date)	with (Nam	e of the Unit)		_	
Apply for membership of the Natio	onal Cadet Co	rps cadets welfare	Society and here	eby subscribe a	sum of
Rs. 4/- (Rupees Four Only) towar	ds its member	ship fee.			
2. My Father/Mother /Guardi	an's occupatio	n is		_ and the annua	I income
of my family from all sources is R	s	per annum.			
3. I understand that I shall be	e entitled to fin	ancial assistance a	as determined by	the Governing	
Body/Managing committee of the	•	•	•		
by me while participating in an org	-	•	•		_
Body/Managing Committee with r	•		ice to be paid to r	me in the event	of
permanent /partial disablement w		•			
4. I hereby nominate the follo	•	•			-
the Governing Body/Managing Co		•		•	the
following person(S) in the event of	f my death wh	ile participating in a	an organized NC	C activity:-	
		T5	T	Τ= .	
S/No. Name of Nominee/Nominees (In	Age	Relationship with the Cadet	Permanent Address of	Percentage of Financial	Ī
Block Letters)		with the Cadet	the Nominee	Assistance	
Block Letters)			THE NOTHINGS	payable	
		<u> </u>			
(To be filled by the cadet in his o	•	• •			
5. My membership in the We	•			lid only till such	time i
remain a cadet in the Division or \	ving of the INC	to which I have	been enrolled.		
Date					
Date:			/Eull Signature	of the Cadet)	
Place:			(Full Signature	or the Cauety	
		CCEPTANCE OF	ENDOL MENT		
1. I solemnly declare that the				are true and th	at no
part of them is false and that I am		•		are true and th	atrio
2. I	-			serve my cour	try and
abode by the Rules & Regulations					
parades and camps as may be re		•		•	oria ali
3. I					n on
authorities for any compensation					
courses, traveling and while on Y		- ·		-	-
no service liability.					a i iia i
The contrice madimity.					
Place:					
			Signature of the	applicant	
Date:			g : 2 0. m10	I. I	
Note: These are not included in the	ne Form 1 of N	CC act & Rules.			

DECLARATION BY PARENT/GUARDIAN

 I solemnly declare that the answers I have give part of them is false and that my son/daughter/ward is with 	en to the question in this form are true and that no illing to fulfill the engagement made.	
I further promise that after the enrolment my son/daughter/ward, I will we no claim on authorities for any compensation in the event of injury or death due to accident during tining camps, courses, traveling and while on YEP or any other such NCC events like RDC and IDC.		
Place: Date:	Signature Parent/Guardian	
CERTIFICA	<u>NTE</u>	
Certified that the applicant and his parent/guardian understand and agree to the conditions of nrolment.		
Certified that the applicant and his parent/guardi enrollment.	ian understand and agree to the condition of	
Place: Date of Enrolment: (Unit Seal)	Signature of Enrolling Officer	
* 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 National	
Cadet Corps.		
Place:	Signature	
Date:	Designation (Medical Officer) Stamp	
<u>TO E</u>	(See Rule 13)	
I agree to extend my Son engagement made.	s's/daughter's/ Wards enrollment for one year and am willing to Fulfill the	
Place: Date	Signature of Parent/Guardian	
Confirmed		
Place Date from which extension starts	Signature of Headmaster/Principal	
Note: This form will be retained?	in the school in which the until is located.	

INDENMITY BOND (FOR MINOR APPLICANTS ONLY)

To The Pr	esident of India	
being r (which (includidomes) abroad represe JCO's in the stresulting participal or NCO MT driadminist officers services arising training	includes Republic Day Camp and Indepering Army, Navy and Air Force Wing actic/international surface, air and water transport, I undertake and agree that neither lentatives will make any claim against the Cortheir equivalents from Navy and Air Force service of the Government, in respect of army in death, due to any reasons whatsoe eation in the above activities and I understated authorities including officers, JCO's/NCO's vers in respect of any such loss or injustrators and other legal representatives to a, JCOs/NCOs or their equivalent from Nave of Government against any claim which rout of any act of default on my part during	or at my own request as a participant in any NCC Campundence Day Camp in Delhi), Course, Adventure Training obtivities, as the case may be) and while traveling (in Isport) and attending Youth Exchange Programme (YEP) I, nor my executors or administrators or other legal Government or against NCC authorities including officers oce, civilians, MT drivers or against any other such personal loss or injury to the property or person, including injury over which I may suffer, while or in consequence of my and that no compensation will be paid by the Government or or their equivalents from Navy and Air Force or Civilian arry and I agree as to bind myself, my executors and indemnify the Government or NCC authorities including by and Air force, Civilian MT drivers or any person in the may be from any third party against them or any of them or in connection with the said camps, courses, adventure Programme or any other such NCC activities as may be
		Signature of Parent/Guardian Name Address:
Witnes		
Witnes 1.	Signature: Name: Address:	
2.	Signature: Name: Address:	
Place:		
Date:		

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