

TO BE COMPLETED BY MEDICAL OFFICER BEFORE ENROLMENT

(13/05/2019)

I have examined (Name).....on date.....and consider Him / her / unfit for enrolment as a cadet in the NATIONAL CORPS.

Signature.....

Designation.....

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A my Son / Daughter / ward agree to extent his / her enrolment for one year and is willing to fulfill the engagement made.

Confirmed

.....
Signature of Principal. (COLLEGE)

.....
Signature of father /Guardian

.....
Signature OC unit

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

NOMINATION FORM

FOR MEMBERSHIP OF THE NCC CADET WELFARE SOCIETY

[To be retained NCC Group HQ]

1. I Cadet (Name in Block Letter).....
 Son/Daughter of Shri (Name in Block Letter).....
 A Student of class..... of (Name of College).....
on my enrolment with NCC on
 (Date).....
 with (Name of the unit.....) apply for membership of the NCC cadet welfare
 Society & hereby subscribe a sum of Rs. 10/- (Rupees Ten only) towards its membership fee.
2. My Father / Mother / Guardians occupation isand the annual income of
 my family from all sources Rs.per annum.
3. I understand that I shall be entitled to financial relief 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 organized NCC activity. I hereby accept that the decision of the Governing Body /
 Managing Committee with regard to the quantum of binding on me.
4. I hereby nominate the following person / persons who will receive financial assistance as per the share
 indicated & 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
 organized NCC activity.

| Sl. No. | Name of the nominee / nominees (in block letters) | Age | Relationship With the Cadet | Permanent Address the nominee | Percentage of financial assistance payable |
|---|---|-----|-----------------------------|-------------------------------|--|
| (To be filled by the Cadet in own hand writing) | | | | | |

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 ANO

Section -III

I am Willing to allow my son / daughter / ward name.....to become a member of the NCC Cadets Welfare Society under the terms and condition and rules in force of the society. I also approve of the nomination made in Section 1 (4)

(Signature) _____

Date.....

Place.....

(Full Signature of the Father / Mother / Guardian with complete address)

Witness

Witness

1. _____
(Signature)

2. _____
(Signature)

Full name and address with Office Seal of the Witness

Full name and address with Office Seal of the Witness

Note: The witness should be either gazetted office / head of institution / NCC part Time office / Sapanch / Village Head.

Section-IV

Received a sum of Rs. 10/- (Rupees Ten only) as one time subscription and enrolled as a member of the NCC Cader Welfare during the cadetship in the Junioor / Senior Division /Wing.

Date.....

Place.....

(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.....