Nomination Form For Membership of the NCC Cadets' Welfare Society

SECTION - 1

| 1. | I, No | Cade | | | S/o., Mr | | |
|-------------|--|--------------------------------|-----------------------|---------------------------------------|--|---|--|
| | I, No Cadet S/o., Mr (Name in black letters) | | | | | | |
| | ************************************** | | student o | f class | of | | |
| | (Name in black letters) | | | | | | |
| | on my enrolment with JD / JW / SD / SWNCC on | | | | | | |
| | (School / College) | | | | | | |
| | withapply for membership to the NCC Cadets' Welfare Society and hereby | | | | | | |
| 2. | My Parents / Guardian's occupation is and the annual income | | | | | income of my family | |
| | from all sources is l | Rs | | | _per annum. | | |
| 3. | I understand that I shall be entitled to financial relief as determinded by the Govening Body / managing Committee of the above society in the event of partial or permanent disablement, sustained by me while participating in an organised NCC actively. I hereby accept that the decision of the Governing Body managing Committee with regard to the quantum of relief to be paid to me in the event of my partial permanent disablement will be final and binding on me. | | | | | | |
| 4. | indicated and as de | termined by the | e Govern | ing Body/ Manag | ing Committee of th | ssistance as per the share the above society, which will articipating in an organised | |
| Ser. No. | Name of the Nominees (in bl | | Age | Relationship with the Cadet | Permanent address of the nominee | Percentage of financial assistance payable | |
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| | | , | | | | | |
| | | (to be f | illed by t | he Cadet in own | handwriting) | | |
| 5. | My mambership in a cadet in the division | the Welfare S on of the NCC | ociety ar to which | nd this Nominatio I have been enro | n Form will be valid olled. | d only till such time I rema | |
| Place | A | | | | | | |
| iau | e | | | | | Signature of the Cade | |

SECTION - II

| Place | | | | | |
|---|--|--|--|--|--|
| Date | Signature of the Associate NCC of | | | | |
| | SECTION - III | | | | |
| I am willing to allow my son / ward Mr Cadet's Welfare Society under the terms and c nomination made in Section 1 (4) | to become a members of the NCC conditions and rules in force of the Society. I also approve of the | | | | |
| Place | | | | | |
| Date | Signature of the Parent / Guardian | | | | |
| Name | & Address | | | | |
| | | | | | |
| Witness | NAPI. | | | | |
| | Witness | | | | |
| 1(Signature with Date) | 2(Signature with Date) | | | | |
| Name & Address | Name & Address | | | | |
| | | | | | |
| | | | | | |
| | Gazetted officer, Head of Insitution / Association NCC Officers / | | | | |
| | SECTION - IV | | | | |
| Received a sum of Rs. 10/- (Rupees Ten NCC Cadet's welfare Society during the cadets) | n only) as one time subscription and enrolled as a member of the hip in the Senior / Junior Division / Wing. | | | | |
| Place : | | | | | |
| Date . | (Signature of the OC Unit with Seal) | | | | |
| | SECTION - V | | | | |
| (To be fi | lled in by the NCC Unit) | | | | |
| Date of despatch of the Nomination form to Gro | up HQ | | | | |
| Note: The Nominatino will be printed on both si | des of a Single leaf | | | | |