MEMBERSHIP OF THE NCC CADETS WELFARE SOCIETY NOMINATION FORM SECTION-I

 I, Cadet 	(name in block	k Letters)	S	on/Daughter of
Shri (Name in b	olock letters)		, a student of class	of
(Name of Coll	ege/School)		on my enrolm	nent With the
•	,		of the unit)	
			Corps Cadets Welfare Socie	
	-		towards its membership fee.	oty and 110.00y
Subscribe a sum	or its. 47 (itap	cco i cai cilly)	towards no membership lee.	
2. My Fath	er/Mother/Guard	dian's occupa	tion is	and the
annual income of	my family from	all sources is R	Rs per	annum.
Governing Body permanent disable hereby accept the the quantum of a will be final and be determined by the	Managing concepted when the decision assistance to be bounding on me. In maninate the force Governing Bounding	nmittee of the ed by me while of the Governing person ody/Managing C	o financial assistance as determined above. Society in the eventer participating in an organised ing Body/Managing Committee on the event of permanent/particles) who will receive financial Committee of the above Societ the event of my death while participations.	t of partial or d NC activity. I with regard to al disablement assistance, as by, which will be
organised NCC a		9 (- /	μ	9
Ser. Name No Nomine	9	Relationship with the Cadet	Permanent Address of the Nominee(s)	Percentage of Financial Assistance payable
(To be filled by th	ne cadet in his o	own handwriting	1)	1

My membership in the Welfare Society and this Nomination Form will be valid only till

(Full Signature of the Cadet)

such time I remain a cadet in the Division or Wing of the NCC to which i have been enrolled

Date:

Place:

SECTION-II

Data				
Date:	(O' ((DTO / 11 1 - (11 (1 (1))			
Place:	(Signature of PTO/ Head of Institution)			
SECTION-III				
I am willing to allow my son/daughter/ward (Name)				
to become a member of the National Cadet Corps Cadet Welfare Society under the terms				
& conditions and the rules in force of the Society. I also approve the nomination(s) made in				
Section I (4).				
Date:				
Place:	(Full Signature of the Father/Mother/Guardian)			
Witness	Witness			
1	2			
(Signature)	(Signature)			
Full Name & Address or	Full Name & Address or			
Office Seal of the Witness	Office Seal of the Witness			
Note: The witnesses should be either gazetted efficer/head of institution /Associated NCC				
Note: - The witnesses should be either gazetted officer/head of institution /Associated NCC Officer/Sarpanch/Village Head.				
	SECTION-IV			
Received a sum of Rs. 4/- (Rupees four only) as one time subscription & enrolled as a member of the National Cadet Corps Welfare Society during the Cadetship in the				
Junior/Senior Division/Wing.	olps Wellate Society during the Cadetship in the			
Date:				
Place:	(Signature of the OC Unit with Official Seal)			
SECTION-V				
(To be filled by the NCC unit)				
Date of despatch of the Nomination form to Group HQ				
·				