NOMINATION FORM

FOR MEMBERSHIP OF NCC CADETS WELFARE SOCIETY

(To be retained at NCC Gp. Hqs.)

SECTION - I

1.	I, Cadet (name in bloc	ck letters)	,		
Son	/Daughter of Sri (name i	in block le	etters)		
A stu	udent of class		o	f (name of college / sch	ool)
			on my er	nrolment with the NCC o	on (date)
with	(name of unit)			a	apply for membership
	e NCC Cadets Welfare S				
	nbership fee.				
2.	My father / Mother /	Guardian'	's Occupation is		and the annual
incor	me of my family from all		•		
mana	cipating in an organized aging Committee with re nanent disablement will b	egard to th	ne quantum of relie	f to be paid to me in the	e event if my partial /
4. share which	I hereby nominate the eindicated and as determ will be final and binding ganized NCC Activity: - Name of the Nominees	following prined by too	person/ persons / w he Governing body	ho will receive financial at / Managing Committee in the event of my death Permanent address of the nominee	of the above Society, while participating in Permanent of financial
4. share which an or SI. No.	I hereby nominate the indicated and as determ will be final and binding ganized NCC Activity:	following prined by to go on the fo	person/ persons / w he Governing body ollowing person(s) i Relationship	/ Managing Committee n the event of my death Permanent address	of the above Society, while participating in Permanent of
4. share which an or SI. No.	I hereby nominate the eindicated and as determ will be final and binding ganized NCC Activity: - Name of the Nominees	following prined by to go on the fo	person/ persons / w he Governing body ollowing person(s) i Relationship	/ Managing Committee n the event of my death Permanent address	of the above Society, while participating in Permanent of financial
4. share which an or SI. No.	I hereby nominate the eindicated and as determ will be final and binding ganized NCC Activity: - Name of the Nominees	following prined by togother for the following Age	person/ persons / whe Governing body ollowing person(s) in Relationship with the cadet	/ Managing Committee in the event of my death Permanent address of the nominee	of the above Society, while participating in Permanent of financial
4. share which an or SI. No.	I hereby nominate the e indicated and as determ will be final and binding ganized NCC Activity: - Name of the Nominees (in block letters)	following prined by to go on the following Age	person/ persons / whe Governing body ollowing person(s) in Relationship with the cadet	/ Managing Committee in the event of my death Permanent address of the nominee	of the above Society, while participating in Permanent of financial assitance payable
4. share which an or SI. No.	I hereby nominate the e indicated and as determ will be final and binding ganized NCC Activity: - Name of the Nominees (in block letters)	following prined by to go on the following Age (to be fillowed by the following the f	person/ persons / whe Governing body ollowing person(s) in Relationship with the cadet in pociety and this nomination of the cade in the c	/ Managing Committee in the event of my death Permanent address of the nominee own hand writing)	of the above Society, while participating in Permanent of financial assitance payable
4. share which an order SI. No.	I hereby nominate the indicated and as determ will be final and binding ganized NCC Activity: - Name of the Nominees (in block letters)	following prined by to go on the following Age (to be fillowed by the following of the North Age)	person/ persons / whe Governing body ollowing person(s) in Relationship with the cadet in pociety and this nomination of the cade in the c	/ Managing Committee in the event of my death Permanent address of the nominee own hand writing)	of the above Society, while participating in Permanent of financial assitance payable

(Full Signature of the Cadet)

SECTION - II

Date:	
Place:	
	Signature of PTO / Head of the Institution
	of the institution
SECTION	<u>- III</u>
Lam willing to allow my con / doughter /	to
I am willing to allow my son / daughter / ward nam become a member of the NCC Cadets Welfare Society force of the society. I also approved of the Nomination ma	under the terms and conditions and rules in
Date :	
Place:	
	(Full Signature of Father / Mother / guardian with complete address
WITNES	<u>3</u>
1	2
(Signature) Full name and address or Office Seal of the witness	(Signature) Full name and address or Office Seal of the witness
Note: The witness should be either gazetted officer, head Sarpanch / Villag head	of the Institution / NCC part time Officer /
SECTION - I	<u>V</u>
Received a sum of ₹ 10/- (Rupees Ten only) as one of the NCC Cadets Welfare Society during the cadetship in	time subscription and enrolled as a member the Junior / Senior Division / wing.
Date :	
Place :	Signature of OC Unit with Office Seal
	o de la companya de l
SECTION - V	V
(To be filled in the NC	
Date of dispatch of the nomination form to group Hqs	