NOMINATION FORM

For membership of the NCC Cadets Welfare Society

(To be retained at NCC Group HQ)

Section -1

1. I, Cadet (name in block letter)
Son/daughter of Shri (name in block letter)
Student of class of (Name of the College/School
with (Name of the unit
apply for membership of the NCC Cadets Welfare Society and hereby subscribe a sum of Rs. 15/- (Rupees Fifteen only) towards membership fee.
2. My Father/Mother/Guardian's occupation is
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 relief to be paid in the event of my partial /permanent disablement will be final and binding on me.
4., I here nominate the following person/persons who will receive financial assistance as per the share indicated and as determined by the Governing Body/Managing

Sr. No	Name of the Nomine/Nominees (in block letters)	Age	Relationship with Cadet	Permanent address of the nominee	Percentage Of financial Assistance Payable

Committee of the above society, which will be final and ending on the following

person(s) in the event of my death while participating in an organized NCC activity.

(To be filled by the cadets in own hand writing)

5. My membership in the welfare Society and this Nomination Form will valid only to such time I remain a cadet in the Division or wing of the NCC to which I have been

emonea.	
Date :	
Place :	(full signature of the Cadet)
Se	ection – II
Place :	
Date:	Signature of head of Institution
<u>Se</u>	ection – III
	Vard nameto Welfare Society under the term & Condition and ne nomination made in section I (d)
Date:	
(full s	signature of the Father/Mother/Guardian
Place :	
Witness	<u>Witness</u>
Full name and address of office	Full name and address of office
Seal or the witness	Seal or the witness
1	2
Address	Address
Note :- The witness should be either Institutor/ANO/Sarpanch village head	gazette officer, head of the
<u>Se</u>	ection – IV
` •	es Fifteen Only) as one time subscription and ets Welfare Society during the Cadetship in the
Place	
S	ignature of the OC unit with Office Seal
<u>Se</u>	ection – V
(To be fille	d by the NCC unit)
Date of Dispatch of the Nomination Fo	orm to Group HQ
Note :- Nomination Form will be Pri	nted on sides of as single leaf