



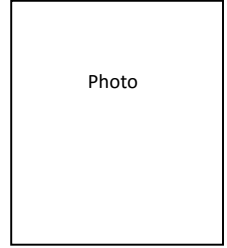
1 RAJ ENGR. REGT. NCC
M.B.M. ENGINEERING COLLEGE UNIT
JAI NARIAN VYAS UNIVERSITY JODHPUR
 RATANADA CIRCLE, RESIDENCY ROAD, JODHPUR-342001



Associate NCC Officer,
 MBM Engineering College Unit,

Sir,

I want to join NCC in 1 Raj. Engr. Regt. NCC Jodhpur Unit.
 My details are following:



Name (fill in Capital Letters): _____ (in English) _____ (in Hindi)

Father's Name : _____ (in English) _____ (in Hindi)

Mother's Name : _____ (in English) _____ (in Hindi)

Date of Birth : _____ **Gender** : _____

E-Mail ID : _____ **Blood Group** : _____

College Name : _____

Branch / Subject : _____ **Class** : _____

Bank Account No. : _____ **Adhar Card No** : _____

Mobile No. : _____ (Student) **Mobile No** : _____ (Father)

Present Address : _____ **Permanent Address** : _____

Declaration:

- I _____ S/O _____ do hereby undertake the following: -
1. I, hereby, declare that, the entries made by me in the Application Form are complete and true to the best of my knowledge and based on records.
 2. I, hereby, promise to abide by the admissible rules and regulations, concerning discipline, attendance, etc. of the NCC, and also to follow the Code of Conduct prescribed for the Cadets of the NCC. I acknowledge that, the NCC has the authority for taking punitive actions against me for violation and/or non-compliance of the same.
 3. I, understand that, 100% attendance in parades is compulsory and I commit myself to adhere to the same. I also understand, in case my attendance falls short, for any reason, the competent authority of the NCC may take such punitive action against me.
 4. I, hereby declare that, I shall be solely responsible for my involvement in any kind of undesirable / indisciplinary activities outside the NCC, and shall be liable for punishment as per the law of the land. I, further understand that, the NCC shall in no way provide any support to me and will not be held responsible for my any such action.
 5. I, also declare that, I am not suffering from any serious/contagious ailment and/or any psychiatric / psychological disorder.
 6. I, further declare that, my admission may be cancelled, at any stage, if I am found ineligible and/or the informations provided by me are found to be incorrect.

Date:

Place:

Signature of Father / Guardian

Signature of Student

(For Office use only)

Admitted / Not Admitted

Signature of ANO