

FORM-II
NATIONAL CADET CORPS

SENIOR DIVISION/ WING ENROLMENT FORM (SEE RULES 7 AND 11 OF NCC ACT /1948)

1. Name (IN BLOCK LETTERS) _____
Name (In Hindi) _____
2. Nationality & Date of Birth _____
Indian _____
3. Father Name (In English) _____
Father Name (In Hindi) _____
4. Mother Name (In English) _____
Mother Name (In Hindi) _____
5. Permanent Address _____

6. Mobile No (Self) _____
7. E mail ID _____
8. Blood Group _____
O+
9. Sex _____
female
10. Nearest Railway Station _____
11. Nearest Police Station _____
12. Educational Qualification & marks _____
+2 passed 86.6%
13. Identification marks (at least two) _____
2 moles on left of nose
14. Have you ever been convicted by a criminal court.
& If so in what circumstances and what was the
sentence? Attach relevant documents _____
NO
15. Name of Institution & stream (Art/Sci./Commerce) _____
COVS, LUVAS
16. Willing to be enrolled and undergo
Training under the NCC Act, 1948 _____
Yes
17. NCC Unit to be enrolled in _____
1 HARYANA R&V SQN NCC, HISAR
18. Have you been enrolled in NCC earlier
If yes your enrolment Number ? _____
No
19. Have you been dismissed from NCC/ the territorial
Army/ The Indian Armed forces? Please provide detail _____
No
20. Next of Kin with address with Relationship
& Telephone No. _____
TEH
21. Bank Account No. (Self) _____
22. Name of Bank With IFSC Code _____
23. Aadhar/UID No. _____
24. PAN Card No. _____

Place: Hisar

Date: 21-10-24

(Signature of the applicant)

TO BE COMPLETED BY MEDICAL OFFICER BEFORE ENROLMENT

I have examined (Name) _____ on _____ (date) and consider him/her fit/unfit for enrolment as a Cadet in the National Cadet Corps.

Place : _____

Signature _____

Date : _____

Designation _____
(Medical Officer)

TO BE USED FOR EXTENSION OF ENROLMENT
(SEE RULES 13)

A. I agree to extend my enrolment for one year and am willing to fulfil the engagement made.

Place : COVS, LUVAS

Date : 21-10-2024

(Signature of the applicant)

Confirmed.

Place : COVS, LUVAS

Date : 21-10-2024

Dr. Bhawli

201
Officer Commanding

1 Haryana R&V Sqn NCC

(Signature of Commanding Officer)

B. I agree to extend the enrolment of my son/daughter/ward for one year and am willing to fulfil the engagement made.

Place : COVS, LUVAS

Date : 21-10-2024

(Signature of Parent/Guardian)

DECLARATION ON ACCEPTANCE FOR ENROLMENT

1. I solemnly declare that the answers I have given to the questions in this form are true and that no part of them is false and that I am willing to fulfil the engagement made.

2. I, _____ promise that I will honestly and faithfully serve country and abide by the Rules & Regulations of the National Cadet Corps that will, to the best of my ability, attend all parades and camps as may be required by the Commanding Officer from time to time.

3. I, _____ further promise that after enrolment, I will have no claim on authorities for any compensation in the event of injury or death due to accident during training camps, courses, travelling and while on YEP or any such NCC events like RDC and IDC. I understand I have no service liability.

Place : COVS, LUNAS

Date : 21-10-2024

(Signature of the applicant)

DECLARATION BY PARENT/GUARDIAN

1. I solemnly declare that the answers given in this form are true and that no part of them is false and that my son/daughter/ward is willing to fulfil the engagement made.

2. I, MASTAN SINGH promise that after the enrolment of my son/daughter/ward, I will have no claim on authorities for any compensation in the event of any injury or death due to accident during training camps, courses, travelling and while YEP or any other such NCC events like RDC and IDC.

Place : COVS, LUNAS

Date : 21-10-2024

(Signature of Parent/Guardian)

CERTIFICATE

Certificate that the applicant and his parent/guardian understand and agree to the conditions of enrolment.

Place : 21/10/24

Date : Hisar

(Signature of the ANO)
1 Har R&V Sqn NCC
Hisar

FORM OF INDEMNITY BOND

The president of India,

I, _____ (the undersigned) In consideration of being nominated either by NCC authorities or at my own request as a participant in any **Riding/NCC camps/activities** (which includes Republic day Camp at New Delhi) Course, adventure training (including Army, navy & Air Wing activities or as the case may be) and while travelling (in domestic/international surface, air and water transport) and attending and Youth Exchange Programme Abroad. I undertake and agree that neither I nor my executors or administrators or other representatives will make any claim against the Govt or against the NCC authorities including Officers, JCOs/NCOs or their equivalent from Navy or air Force, Civilians, MT drivers or against any other personnel in the service of the Govt in respect of any loss or injury to any, the property or personnel, including injury resulting in death due to any reason whatsoever which I may suffer while or in consequences of any participation in the above activities and I understand that no compensation will be paid by the Govt or NCC authorities including Officers, JCOs/NCOs or their equivalent from Navy and air Force, civilians, MT drivers in respect of any personnel in the service of the Govt against any claim, which may be any third party against them or any of them arising out of any or the act of default on my part during or in connection with the camp, course adventure training travelling and while on Youth Exchange Programme or any other such NCC activities as may be organized from time to time within or outside the union or India.

Place : CONVS, LUVAS

Date : 21-10-2024

(Signature)

Name

Address

Tel.

Mobile

In the presence of Parents

1. Signature _____

Name MA

R/o VPO-R

In the presence of witness

2. Signature Singh

Name Singh

R/o Jandwala Rajar, Fatehabad

COUNTERSIGNED BY PRINCIPAL/DEAN

Place : HISAR

Date : 14/11/24

Date

College of Vety. Sciences
LUVAS, Hisar



परिशिष्ट 'क'

(पत्र 19952/डी जी एन सी सी/सी डब्ल्यू एस
दिनांक 05 फरवरी 1991)

नामन फार्म

एन सी सी कैंडेट कल्याण समिति की सदस्यता के लिए
(एन सी सी युव मुख्यालय में रखा जाए)

खण्ड-1

1. मैं कैंडेट (नाम स्पष्ट अक्षरों में) [REDACTED] (नाम स्पष्ट अक्षरों में) [REDACTED] कक्षा 11th year स्कूल/कॉलेज पशु विज्ञान बिड़वा विद्यालय एन सी सी में (तारीख) 21-10-2024 को युनिट में भर्ती होने पर एन सी सी कैंडेट कल्याण सोसाइटी की सदस्यता के लिए आवेदन करता हूँ और सदस्यता शुल्क के लिए 20 रुपये (ग्रेजुअट बीस रुपये) का अर्पण करता हूँ।
2. मेरे पिता/माता/अभिभावक का व्यवसाय [REDACTED] है और परिवार की सभी स्त्रियों से वार्षिक आय [REDACTED] रुपये है।
3. मुझे इतना है कि मैं एन सी सी के आयोजित क्रियाकलाप के दौरान अधिक या स्थाई रूप से अलग हो जाने पर उपर्युक्त समिति के शाली निकाय/प्रबन्धक समिति द्वारा निर्धारित की गई आर्थिक सहायता पाने का हकदार होऊंगा। मैं यह भी स्वीकार करता हूँ कि अधिक/स्थायी अयोग्यता होने पर आर्थिक सहायता की मात्रा के बारे में शाली निकाय/प्रबन्धक समिति का निर्णय अन्तिम होगा और मुझ पर बाध्यकारी होगा।
4. मैं निम्नलिखित व्यक्ति/व्यक्तियों को नामित करता हूँ जो उल्लिखित दर के आधार पर और उपर्युक्त सोसाइटी के शाली निकाय/प्रबन्धक समिति द्वारा लिए निर्णय के अनुसार, एन सी सी के आयोजित क्रियाकलाप के दौरान मेरी मृत्यु हो जाने पर आर्थिक सहायता प्राप्त करने के हकदार होंगे, जो अन्तिम होगा और निम्नलिखित व्यक्ति/व्यक्तियों पर बाध्यकारी होगा।

क्रम संख्या	नामित व्यक्ति/व्यक्तियों का नाम (स्पष्ट अक्षरों में)	आयु	कैंडेट से सम्बन्ध	नामिता का स्थायी पता	देय आर्थिक सहायता का प्रतिशत
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1.	[REDACTED]	(कैंडेट स्वयं हाथ से भरें)	पिता	VPO-रसीदा (जीन्द) हरियाणा (120116)	50%
2.	[REDACTED]		माता	" "	50%

5. इस कल्याण सोसाइटी में मेरी सदस्यता और नामन फार्म केवल तब तक वैध रहेगा जब तक मैं एन सी सी के प्रभाग या स्तंभ जिसमें मैं भर्ती हुआ था मैं कैंडेट रहूँगा।

स्थान: पशु विज्ञान महाविद्यालय, हिसार

दिनांक: 21-10-2024

(कैंडेट के पूरे हस्ताक्षर)

खण्ड-2

स्थान: हिसार

दिनांक: 21-10-24

ANOC
1 Har R&V Sqn NCC
(अभ्यासिका/अफसर, संस्थान के प्रमुख के हस्ताक्षर)

खण्ड-3

मैं अपने पुत्र/पुत्री का नाम [REDACTED] को सोसाइटी के वर्तमान नियमों शर्तों एन सी सी कैंडेट कल्याण सोसाइटी का सदस्य बनने की अनुमति देता हूँ। मैं खण्ड-1 (4) में नामांकन को भी स्वीकार करता हूँ।

स्थान : पशु विज्ञान महाविद्यालय

दिनांक : 21-10-2024

[REDACTED]
(पिता/माता/अभिभावक के पूरे हस्ताक्षर तथा पूरा पता)

साक्षी :-

1. (हस्ताक्षर)

साक्षी का पूरा नाम व पता या
कार्यालय मोहर

2. (हस्ताक्षर)

साक्षी का पूरा नाम व पता या
कार्यालय मोहर

टिप्पणी-साक्षी राजपत्रिक अधिकारी, संस्थान का प्रमुख/एन सी सी अथ कालिक अफसर/सरपंच/ग्राम प्रधान हो।

खण्ड-4

एक बार दिया जाने वाला अंशदान 20 -रुपये (केवल बीस रुपये) प्राप्त किया और कनिष्ठ/वरिष्ठ प्रभाग स्कूल में कैंडेट रहने की अवधि के लिए एन सी सी कैंडेट कल्याण सोसाइटी के सदस्य के रूप में नामांकन किया।

स्थान : हिसार

दिनांक : 21-10-24

[Signature]
[REDACTED]
(अथ कालिक अफसर/सरपंच/ग्राम प्रधान)

खण्ड-5

(इसे एन सी सी युनिट भरे)

नामन फार्म ग्रुप मुख्यालय को भेजने की तारीख

टिप्पणी :- नामन फार्म एक पृष्ठ पर दोनों और छाया जाए।

Kind attention: Sr. Medical Officer, University Campus Hospital, CCS MAU, Hisar,

Registration no. 650753116

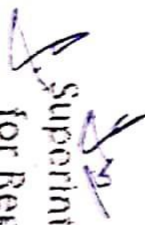
Name [REDACTED]

Father's Name [REDACTED]

has been provisionally admitted in

B.V.Sc.&A.H. programme in the academic session 2024-25. He/She is allowed by the Admission Committee for Medical Examination at University Campus Hospital, CCS MAU, Hisar.

Medical Certificate shall be deposited back to the concerned college of Dean office.


Superintendent
for Registrar

1030245



रजि. नं.

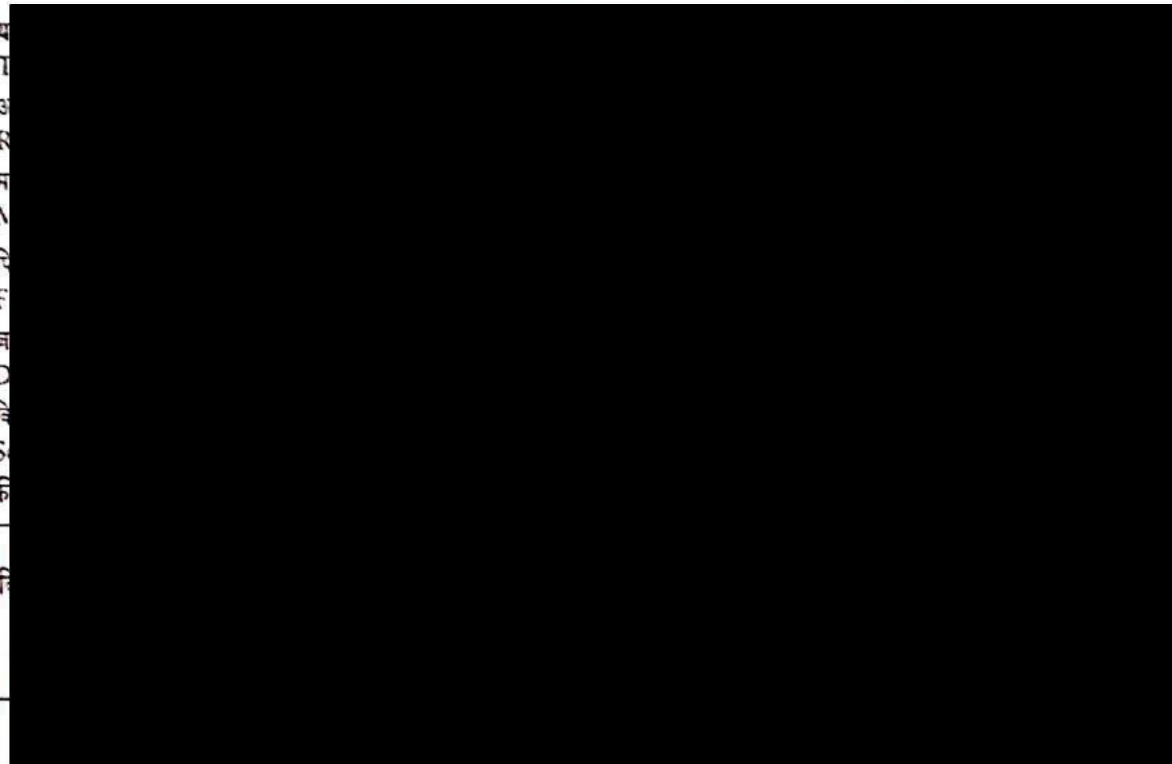
Regn No.

H121/40264/0076

केन्द्रीय माध्यमिक शिक्षा बोर्ड
CENTRAL BOARD OF SECONDARY EDUCATION

अंक विवरणिका सह प्रमाण पत्र
MARKS STATEMENT CUM CERTIFICATE

माध्यमिक विद्यालय परीक्षा, 2021
SECONDARY SCHOOL EXAMINATION, 2021



स्थितीय ग्रेड
POSITIONAL
GRADE

A1

002 HIN
041 MA
086 SC
087 SC
AD
004 PU

संक्षिप्तों का अर्थ

AB : अनुपस्थित Absent

IA : आंतरिक मूल्यांकन Internal Assessment

प्रा./PR. : प्रायोगिक/Practical

ER : अनिवार्य पुनरावृत्ति सभी विषयों में Essential Repeat in all subjects

दिल्ली Delhi

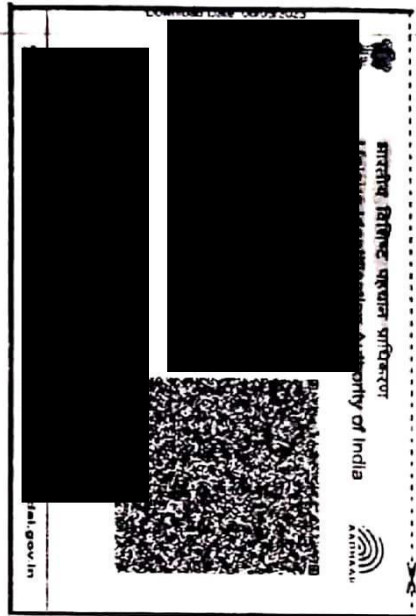
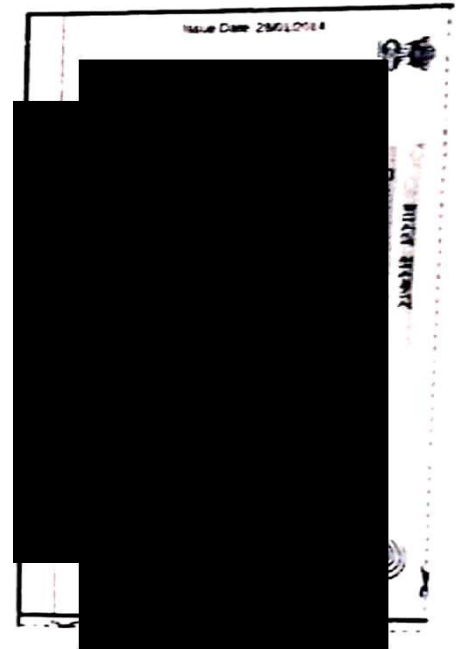
दिनांक Dated : 03-08-2021

परीक्षा नियंत्रक

Controller of Examinations

सह-शैक्षणिक उपलब्धियाँ : सह-शैक्षणिक एवं अनुशासन क्षेत्र में प्रायोगिक विद्यालय द्वारा अपने स्तर पर बोर्ड द्वारा जारी प्राकल्पानुसार प्रदान की जाती है।
Co-Scholastic achievements : Grading for Co-Scholastic and Discipline area is being issued by the school as per format prescribed by the Board.





Ad = Amount/रकम	Csh = Cash/कैश	Pos = Point of Sale/बिस्तर बि
Adj = Adjustment/संशोधन	dep = Deposit/वसूली	Pr = Principal/प्रिन्सिपल
Am = Amount/रकम	Dft = Draft/ड्राफ्ट	proc = Processing Charge/प्रोसेसिंग चार्ज
Ar = Arrear/अग्रिम	dish/dish = Dishonor/अग्रिम	rd = Recurring Deposit/रकम वसूली
bal = Balance/बैलेंस	DR = Debit/डेबिट	ret/rtn = Return/रिटर्न
Cap = Capitalization/कैपिटल	DOB = Date of Birth/जन्म तिथि	Rnd = Round off/राउंड ऑफ
Chg/ch = Charge/चार्ज	eft = Electronic Fund Transfer/इलेक्ट्रॉनिक फंड ट्रांसफर	sb = Savings Bank/सेविंग्स बैंक
Chq = Cheque/चेक	Incop = Inoperative/अकार्य	SC = Short Credit/शॉर्ट क्रेडिट
CIF = Customer Information File/ग्राहक सूचना फाइल	Ins = Insurance/इंश्योरेंस	SI/Sa/SORD = Standing Instruction/स्टैंडिंग इंस्ट्रक्शन
Clos = Closure/क्लोजर	Int / In = Interest/इंटरिस्ट	S/D/W/H/o = Son/Daughter/Wife/Husband of/पुत्र/पुत्री/पत्नी/पति
Coll = Collection/कलेक्शन	lon/loan/लोन	tn/tnf/xfer = Transfer/ट्रांसफर
Comm. = Commission/कमिशन	min = Minimum/मिनिमम	txn = Transaction/ट्रान्जैक्शन
COR/CORR = Correction/कॉरिक्शन	os = Outstanding/आउटस्टैंडिंग	Wd = Withdrawal/व्हाड्रॉल
CR = Credit/क्रेडिट	PST = Postal Charges/पोस्टल चार्ज	MOD bal = Total balance (SB+linked MOD a/c)/कुल बैलेंस (सब बैंक + लिंक्ड मॉड अ/c)



भारतीय स्टेट बैंक
STATE BANK OF INDIA
Branch: HARYANA AGRI UNIV. HISSAR
HISSAR

Code: 1566

F
P

:00





Sciences

Lala Lajpat Rai University of Veterinary and Animal

ORIGINAL RECEIPT (Collection)

S.No.	Fee Head Name	Amount
1	College Admission fees	2500
2	Library Fund	200
3	Medical Fund	150
4	Examination Fees	4000
5	College security	1500
6	Library security	2000
7	Sports and Youth welfare fund	350
8	Laboratory fee	5500
9	Amritya Shiksha/ Personal Accident Policy	120
10	Amalgamated fund	4000
11	Student aid fund	250
12	Club charges (Badminton, tennis, music, fine art, photography, literary, debate etc.) per Club	450
13	Student Welfare fund	250
14	Red Cross fund	100
15	Blazer, Tie and College Insignia charges	1300
16	College development Fund	9000
17	NCC Fund	100
18	University Admission Fee	2000
19	Identity card	100
Total		₹ 33,870.00

Remark :

CASHIER

Note:-All students and parents are advised to go through for the Rules and Regulations of BVSc&AH Programme at page No. 15 to 45 of University Calendar Vol.-II available at (<https://luvas.edu.in/regulations.html>)

