Regd No: S/1L/55059

Regd No: S/1L/55059 Motto: Bravery, Unity & Discipline

'ARWS' Senior & Junior Division/Wing Enrollment Form

APPLICATION FOR ENROLMENT

1. What is your name?		
2. Gender	MALE FEMALE	
3. What is your father's name?		
4. What is your father's occupation?		
5. What is your father's annual income?		
6. What is your mother name?		
7. What is your mother occupation?		
8. What is your mother annual income?		
9. What is your parent / guardian name?		
10. Adhar card no of cadet's?		
11. Address :-		
12. Are you a citizen of India, or a subject o	f Nepal	
13. What is your Village, Tehsil or Taluka	Village	
& District?	Tehsil or Taluka	
	District	
	@ PIN CODE	
14. What is your Post Office?		
15. What is your Railway Station?		
16. What are your Education Qualification?		
17. What is your age & date of birth?		

18.In which school/collage are you	now studying?			
19.Are you willing to undergo serv specified in the Act and the rule under?	-			
20.Residential address. as applicable)				
21. Contact number of cadet's & gr	uardian			
DECLARATION	OF ACCEPTANCE FOR ENROLMENT			
22.I solemnly declare that the answ of them is false & that I am willing	vers I have given to the questions form are true & that no part to fulfill the engagement made.			
abide by the Rules & Regulation of	Promise that I will honestly & faithfully serve my count & of the Fighter Cadet Crops that I will to the best of my ability, be required by the 'ARWS' Officer from time to time.			
24.Ifurther promise that after enrollment, I will have no claim on authorities for any compensation in the event of injury or death due to accident during training camps, courses, traveling & while on any other such 'ARWS' event like all camp, RDC & IDC. I understand I have no service liability.				
25.Iof Indian Pineal code act & regulat	promise that I will be binding myself according to the laws ion.			
@				
Place: Date:				
Signature of the guardian	Signature of the candidate			

DECLARATION BY PARENT / GUARDIAN

is

1. I solemnly declare that the answers given in this form are true & that no part of them is false & that my Son / Daughter / Ward is willing to fulfill the engagement made.			
2. Ipromise that after the enrollment of my Son / Daughter / Ward, I will have no claim of authorities for any compensation in the event of any injury or death due to accident during training camps, courses, traveling & while on any others such 'ARWS' events like all camp, RDC & IDMC.			
I agree to adhere to the discipline of the movement and programme in particular and abide by the rules & regulations of training camp during the whole event.			
In case of any accident, Illness or injury, manmade or natural I will not hold the organizer of the ARWS/CAMP responsible at all.			
I farther declare that my son / daughter is keeping good health & physically feet to undergo the ARWS training camp			
Signature of Parent/Guardian			
<u>CERTIFICATE</u>			
Certified that the applicant and his parent / guardian understand and agree to the conditions of enrollment.			
Date of Enrollment Signature of Enrolling Officer			
TO BE COMPLITED BY SCHOOL OR COLLEGE HEAD AUTHORITY			
@ Place: Signature			
Date: Headmaster/Headmistress/Principal			
(With Seal)			

TO BE COMPLITED BY MEDICAL OFFICE BEFORE ENROLMENT

I have been examined (Name)on			
@ Place:	Signature		
Date:	Designation		
TO BE COMPLITED BY 'ARWS' CH	(MEDICAL OFFICER) IEF OFFICE BEFORE ENROLMENT		
Place:	Signature		
Date:	Designation		

INDEMINITY BOND

The P	resident of India		
nomin 'ARW anywh may b undert the Go in resp any re in the author agree indem service of the course	nated either by the 'ARWS' authorities I'S' camp (which includes Republic Day nere), Course Adventure Training (including the) and while traveling (in domestic/intake and agree that neither I, nor my other overnment or 'ARWS' authorities any other extensions whatsoever which my ward may sugarbove activities & understand that on exity including 'ARWS' officers' equivalent as to bind myself; my executors and anity the 'ARWS' authorities or equivalent of Government against any claim which marising out of any act of default on his	Name	on ase on ase on to the total ps
Witne 1.	ess		
1.	Name	Signature	
	Address	Signature of Parents / Guardians	
	Signature		
2.	Name	Date :	
	Address	Place:	
	Signature		
*Note *Docu	aments require of Applicant: - Education	qualification proof, Adhar Card & Photo 2 co	py

*Documents require of Guardian :- Adhar Card

*নাবালক বা নাবালিকাদের স্বাক্ষর প্রয়োজন নেই।

<u> স্বীকারোক্তি / ঘোষণা পত্র</u>	
আমি শ্রী / শ্রীমতিপিতা	
নিবাস ঘোষণা	করিতেছি যে আমার পুত্র / কন্যা
	মগ্লি রুরাল ও্রেল্ফেয়ার সোসাইটির বেসিব
প্রশিক্ষণে স্বেচ্ছায় ভর্তি করিয়াছি এবং ভর্তি হওয়ার পর অগ্নি রুরাল	ওয়েলফেয়ার সোসাইটির ও এল.সি.সি–এর
নিয়ম কানুন মেনে চলার অঙ্গীকার করছি, এর অন্যথায় হইলে বা কে	ানোরূপ সংগঠনের নিয়মের বিরুদ্ধাচরণ
করিলে অথবা যে কোনও দুর্ঘটনা বা অসুবিধার সম্মুখীন হলে আমরা	কোনো এন.সি.সি ইউনিট ও অগ্নি
রুরাল ওয়েলফেয়ার সোসাইটি কাহাকেও কোনো ভাবে দোষারোপ ব	করিতে পারিবনা তাহা অঙ্গীকার করিতেছি
শ্বজ্ঞানে।	
	ইতি
	বিনীত
আমি সজ্ঞানে সমস্ত কিছু বুঝিয়া সহমত জ্ঞাপন করিতেছি।	
	স্রাক্ষর ((পিতা / মাতা)
আমি সজ্ঞানে সমস্ত কিছু বুঝিয়া সহমত জ্ঞাপন করিতেছি।	
	 শ্বাক্ষর (ছাত্র/ছাত্রী)