

**UNIVERSITY LEVEL LEADERSHIP CAMP  
25<sup>th</sup> to 27<sup>th</sup> FEBRUARY 2015  
REGISTRATION FORM AND COMMITMENT CERTIFICATES**

Attach  
Photo

**PERSONAL INFORMATION**

Name: \_\_\_\_\_

Class: \_\_\_\_\_ Div \_\_\_\_\_ Roll No \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_ Taluka \_\_\_\_\_ District \_\_\_\_\_ PinCode \_\_\_\_\_

Contact detail: STD Code \_\_\_\_\_ Residence Tel \_\_\_\_\_ Mobile \_\_\_\_\_

Email id: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Spectacles : Yes / No \_\_\_\_\_

**PARENT'S INFORMATION**

Name: \_\_\_\_\_

Office Address \_\_\_\_\_

\_\_\_\_\_ Taluka \_\_\_\_\_ District \_\_\_\_\_ PinCode \_\_\_\_\_

Contact detail: STD Code \_\_\_\_\_ Residence Tel \_\_\_\_\_ Mobile \_\_\_\_\_

Email id: \_\_\_\_\_

**INSTITUTIONAL INFORMATION**

**Name of the college** \_\_\_\_\_

Office Address \_\_\_\_\_

\_\_\_\_\_ Taluka \_\_\_\_\_ District \_\_\_\_\_ Pin Code \_\_\_\_\_

Contact detail: STD Code \_\_\_\_\_ Tel \_\_\_\_\_ faxNo \_\_\_\_\_

Email id: \_\_\_\_\_ Website \_\_\_\_\_

**Name of Principal** \_\_\_\_\_

Contact detail: STD Code \_\_\_\_\_ Tel \_\_\_\_\_ MobileNo \_\_\_\_\_

Email id: \_\_\_\_\_ Website \_\_\_\_\_

**Name of Program officer** \_\_\_\_\_

Contact detail: STD

Code \_\_\_\_\_ Tel \_\_\_\_\_ MobileNo \_\_\_\_\_

Email id: \_\_\_\_\_

## **1) COMMITMENT CERTIFICATES**

**(Jointly signed NSS Volunteer/Parents/ Programme Officer & certify by Principal)**

### **A) UNDERTAKING BY THE PARTICIPATING STUDENT**

*I, undertake to state that, I shall be attending the training program of **University Level Leadership Camp 2015** to be held at \_\_\_\_\_ University from \_\_\_\_\_ to \_\_\_\_\_ at my own risk.*

*In consideration of my being nominated at my request to undergo all types of training and also participating in any NSS training activities in/outside NSS and traveling, I undertake and agree that neither I nor my executor/administrator will make any claim against any officer of NSS/Principal/Program Officer/Program Coordinator/State Liaison Officer/Youth Officer/Assistant Program Adviser/Deputy Program Adviser in respect of any loss or injury to the property or person(including injury resulting in death), which may suffer while or in consequence of my being in training/participating in Leadership Camp*

*I, further undertake to state that I shall be abiding by all rules & regulation of the camp and shall be liable for strict disciplinary action for violation of the same.*

*Signature of the Student*

*Date: \_\_\_\_\_*

### **B) RESPONSIBILITY CERTIFICATE**

*I agree as a responsible person that my Son/Daughter/Ward is being allowed to participate in the above mentioned camp to be held at \_\_\_\_\_ University at my own risk If any accident or death occurs during this camp/program, I or any of my relation of legal heir will not demand any claim from State Govt. /University /College NSS unit, on account of my Son/Daughter/Ward being a part this camp.*

*Signature of Parent/Guardian*

*Date: \_\_\_\_\_*

**C) VOLUNTEERSHIP CERTIFICATE**

*It is certified that the volunteer is a bonafide student of the College/Institution and He /She is a regular NSS Volunteer from the year .....and has completed his/her one year of volunteer ship and he/she is neither a member of NCC nor a member of Scouts and Guides/Rovers/Rangers.*

*Signature of NSS Program Officer*

**College Seal**

*Signature of the Principal*

**2) CERTIFICATE OF MEDICAL/PHYSICAL FITNESS**

*Signature of the candidate: .....*

*I, do hereby certify that I have examined the volunteer and found him/her fit for Undergoing rigorous training for **University Level Leadership Training Program 2015** The candidate whose signature given above is not suffering from any Communicable or chronic disease, which may cause any hindrance due to his/her Participation in the above mentioned rigorous training program.*

*Signature of the Medical Officer*

*Seal*

*Address with Contact No*

*Date: \_\_\_\_\_*