



**ABVGIET PRAGATINAGAR
NATIONAL SERVICE SCHEME
7 DAYS NSS SPECIAL CAMP
REGISTRATION FORM**

Photograph

(PLEASE FILL IN CAPITAL LETTERS)

1.	Name of the Student	:				
2.	Father's / Mother's Name	:				
3.	University Reg No./Roll No.	:				
4.	Branch & Semester	:				
5.	Date of Birth	:				
6.	Gender (Please Tick)	:	Male: ()		Female: ()	
7.	Category (Please Tick)	:	SC: ()	ST: ()	OBC: ()	UR: ()
8.	Permanent Address	:				
9.	Correspondence Address	:				
10.	Telephone No. (Mobile)	:				
11.	Blood Group	:				
12.	Areas of interest	:				

CAMP PARTICIPATION

I wish to participate in the 7-Day NSS Special Camp: ☐ Yes ☐ No

Any specific information/requirement to be brought to the notice of the NSS Programme Officer:

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UNDERTAKING BY THE STUDENT

I, hereby declare that I am willing to participate in the 7-Day NSS Special Camp organized by ABVGIET Pragatinagar. I understand that participation in the camp involves physical activities, outdoor work, community service and other activities included in the approved camp schedule.

- I will maintain discipline and follow all rules, instructions and directions issued by the NSS Programme Officer and the institute authorities.
- I confirm that I am physically fit to participate in the proposed camp activities and will inform the NSS Programme Officer about any relevant health or safety concern.
- I will be responsible for the safety of my personal belongings during the camp.
- I will cooperate with fellow volunteers and contribute actively and responsibly to the successful conduct of the camp.

Date:

Signature of Applicant

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For Office use

Form Verified By:

Signature:

Remarks:

Signature of the Programme Officer