

EK BHARAT SHRESTH BHARAT, KOHIMA (Naga)

13-12-2019 to 24-12-2019

4/5 5/5 COY - H.O. JAIN COLLEGE, ARA

Sl. No	Rank	Reg. No	NAME of candid.	Latin NAME	m
01	cdt	200695/17	PUSKAR KY. SINGH	NARENDRA KY. SINGH	766
02	VO	200516/17	SONALI PRIYA	RAJU KUMAR	80 62.9 73
03	cdt	200529/18	ANCHAL KUMAR	BIRENDRA SAH	7631
04	cdt	200514/17	ANSHU KUMAR	SHASHT KANT SINGH	62005

for smk
PRINCIPAL
H.D. JAIN COLLEGE
ARA

AM
 26.11.2019

OF
ANUJ RAJAN
1/5 COY CDR
H.D. JAIN COLLEGE ARA

K. Mahesh
C.T.O.
26/11/19
PURTI MAHAUR
4/5 COY CDR
H.D. JAIN COLLEGE
ARA

RISK, PERMISSION & ARRIVAL SLIP

1. RISK CERTIFICATE

This is to certify that I, No. 200695117 Rank CADET
Name PUSKAR KR. SINGH Father's Name SRI NARENDRA KR. SINGH
Of Unit 5 BTHAR BN NCC Am
Volunteer to attend the Camp/Course being held at MOHIMA (NAGA
from 13/12/19 to 22/12/19 at my own risk
Date

Sign of Applicant *Puskar Kumar Singh*
Address: NEW COLONY PAKRI
(ARA) A. S. I.

Counter signed by *Narendra Kumar Singh*

(Father/Guardian)

Name in Full NARENDRA KR. SINGH.

2. PERMISSION ATTESTED BY NCC OFFICER/PRINCIPAL

As the father/guardian has give the permission to his son/daughter/ward to attend the above NCC Camp. I therefore, also permit him for the same.

Counter signature of Principal

Date

[Signature]
Signature of NCC Officer
Sd/- COY CDR
C.D. JAIN COLLEGE ARA

3. MEDICAL CERTIFICATE (NCC OFFICERS AND CADETS)

A. Certified that I have examined No. 200695117 Rank CADET
Name PUSKAR KR. SINGH College. HD JAIN COLLEGE (ARA)
Unit 5 BTHAR Bn NCC ARA and found him fit to undergo
training of strenuous nature on the Camp Course being
held at MOHIMA (NAGALAND) from 13/12/19 to 22/12/19

B- 1. Also certify that above mentioned cadet has been inoculated/vaccinated.
2. That the Cadet has been protected against small pos. typhoid and cholera.

3. Signature of cadet *Puskar Kumar Singh* is Attested
4. Signature of Cadet *Puskar Kumar Singh*

Station ARA

Dated

(Sig. of Medical Officer)
M. S. Prasad (Rat.)
Regt No. 13252

4. ARRIVAL SLIP

No. 200695117 Rank CADET Name PUSKAR KR. SINGH
has been detailed to attend the camp/Course being hold
at MOHIMA (NAGALAND) from 13/12/19 to 22/12/19

Station
Date

(Sign of CO Unit)

SK, PERMISSION & ARRIVAL SLIP

1. RISK CERTIFICATE

This is to certify that I No. BTH/SW/2005/16/17 Rank CO
 Name SONALI PRIYA Father's Name Sri RASU KUMAR
 of ARA Unit 5 BATTAL BNCC am
 Volunteer to attend the ARA Camp/Course being held at KOHIMA
 from 13/12/19 to 22/12/19 at my own risk.
 Date ARA

Sign of Applicant SONALI PRIYA
 Address VELLA KHETARE MOHALA ARA
ARA

Counter signed by RASU KUMAR
 (Father/Guardian)

Name in Full RASU KUMAR

2. PERMISSION ATTESTED BY NCC OFFICER/PRINCIPAL

As the father/guardian has give the permission to his son/daughter/ward to attend the above NCC Camp. I therefore, also permit him for the same.

Countersignature of Principal:

Date ARA

U. M. BHAU
 CTO 26/11/19
 U. M. BHAU
 5 COY CDR
 Seal: ARA

3. MEDICAL CERTIFICATE (NCC OFFICERS AND CADETS)

A. Certified that I have examined No. 200516/17 Rank CO
 Name SONALI PRIYA College MD JAIN COLLEGE
 Unit 5 BATTAL BNCC Bn NCC ARA and found him fit to undergo
 training of strenuous nature on the ARA Camp Course being
 held at KOHIMA (NAGALAND) from 13/12/19 to 22/12/19

- B. 1. Also certify that above mentioned cadet has been inoculated/vaccinated
- 2. That the Cadet has been protected against small pos. typhoid and cholera.

3. Signature of cadet SONALI PRIYA

4. Signature of Cadet SONALI PRIYA is Attested

Station ARA

Dated

(Sig. of Medical Officer)
Dr. Pradnakal Deva
 M.B.B. (Pat.)
 Regd. No. 1925

4. ARRIVAL SLIP

No. 200516/17 Rank CADET Name SONALI PRIYA
 has been detailed to attend the ARA camp/Course being hold
 at KOHIMA from 13/12/19 to 22/12/19

Station ARA

Date

(Sign of CO Unit)

RISK, PERMISSION & ARRIVAL SLIP

1. RISK CERTIFICATE

This is to certify that I, No. 200529/18 Rank CADET
 Name ANCHAL KUMARI Father's Name Sri BIRENDRA SAH
 Of Unit SBIHAR BN NCC Am
 Volunteer to attend the Camp/Course being held at
 from to at my own risk.
 Date

Sign of Applicant ANCHAL KUMARI
 Address ARA

Counter signed by BIRENDRA SAH
 (Father/Guardian)
 Name in Full BIRENDRA SAH

2. PERMISSION ATTESTED BY NCC OFFICER/PRINCIPAL

As the father/guardian has give the permission to his son/daughter/ward to attend the above NCC Camp. I therefore, also permit him for the same
 Counter signature of Principal

2008/11/19
C.T.O. 26/11/19
 Principal Officer
 5 COY CDR
 JAIN COLLEGE
 ARA

Date

3. MEDICAL CERTIFICATE (NCC OFFICERS AND CADETS)

A. Certified that I have examined No. 200529/18 Rank CADET
 Name ANCHAL KUMARI College H.D. JAIN COLLEGE
 Unit SBIHAR Bn NCC ARA and found him fit to undergo
 training of strenuous nature on the Camp Course being
 held at KOHIMA (NAGALAND) from 23/12/19 to 29/12/19

- B- 1. Also certify that above mentioned cadet has been inoculated/vaccinated.
 2. That the Cadet has been protected against small pos. typhoid and cholera
 3. Signature of cadet ANCHAL KUMARI
 4. Signature of Cadet ANCHAL KUMARI is Attested

Station ARA

(Sign of Medical Officer at
 M.B.B.S (Pat.)
 Reg. No. 1925

Dated

4. ARRIVAL SLIP

No. 200529/18 Rank CADET Name ANCHAL KUMARI
 has been detailed to attend the camp/Course being hold
 at KOHIMA (NAGALAND) from 13/12/19 to 28/12/19

Station

(Sign of CO Unit)

Date

RISK, PERMISSION & ARRIVAL SLIP

1. RISK CERTIFICATE

This is to certify that I, No. 200514/17 Rank CADET
Name ANSHU KUMARI Father's Name Sr. SHASHI KANT SINGH
Of Unit 5 BTHAR Bn NCC
Volunteer to attend the Camp/Course being held at
from 13-12-19 to 22-12-19 at my own risk.
Date

Sign of Applicant Anshu Kumari
Address Vill - Post - Panchappur
Police - Station - Sandesh

Counter signed by

(Father/Guardian)

Name in Full SHASHI KANT SINGH

2. PERMISSION ATTESTED BY NCC OFFICER/PRINCIPAL

As the father/guardian has give the permission to his son/daughter/ward to attend the above NCC Camp. I therefore, also permit him for the same.

Counter signature of Principal.

Date

G. T. J.
PURTI MAHAUR
4/5 COY CDR
H.D JAIN COLLEGE
ARA

Sign of NCC Officer
Seal

3. MEDICAL CERTIFICATE (NCC OFFICERS AND CADETS)

1. A: Certified that I have examined No. 200514/17 Rank CADET
Name ANSHU KUMARI College H.D JAIN COLLEGE
Unit 5 BTHAR B Bn NCC ARA and found him fit to undergo
training of strenuous nature on the Camp Course being
held at KOHIMA (MANALAND) from 13-12-19 to 22-12-19

B- 1. Also certify that above mentioned cadet has been inoculated/vaccinated.

2. That the Cadet has been protected against small pos. typhoid and cholera.

3. Signature of cadet Anshu Kumari

4. Signature of Cadet Anshu Kumari is Attested

Station ARA

H.D JAIN COLLEGE
ARA

(Sign of Medical Officer)
Dr. Pankaj Devra

Dated

(Stamp)
M.B.B.S (Pat.)

Regt. No-13253

4. ARRIVAL SLIP

No. 200514/17 Rank CADET Name ANSHU KUMARI
has been detailed to attend the camp/Course being hold
at KOHIMA (MANALAND) from 13-12-19 to 22-12-19

Station

Date

(Sign of CO Unit)