

### TRIVENIDEVI BHALOTIA COLLEGE

(Govt. Sponsored)

Post: Raniganj, Dist.: Paschim Bardhaman, Pin- 713347 ESTD - 1957

Date: 09/09/2025

# **NCC ADMISSION NOTICE 2025**

## NATIONAL CADET CORPS (NCC) COY - III, RANIGANJ-713347

#### [A] GENERAL INSTRUCTIONS:

- (i) Form issuing date (Online: www.tdbcollege.ac.in): 09/09/2025 20/09/2025
- (ii) Date of form submission (To college office in hard copy): 09/09/2025 -20/09/2025 from 11:00 am to 2:00 pm (except holidays).

#### [B] MANDATORY DOCUMENTS TO BE SUBMITED ALONG WITH THE FORM:

- (i) Self-attested photocopy of 10th standard examination: *mark sheet, admit card* (as age-proof certificate) & *passing certificate*
- (ii) Self-attested photocopy of 12th standard examination: mark sheet, & passing certificate
- (iii) Self-attested photocopy of receipt and acknowledgement of confirmation of admission slip
- (iv) Self-attested photocopy of aadhaar card
- (v) Self-attested photocopy of blood group certificate
- (vi) Self-att<mark>ested photocopy of *any other certificates* (such as: NCC (A) certificate, National/State level sports certificate etc.)</mark>
- (vii) Self-attested photocopy of Bank pass book
- (viii) Passport size recent colour photo 4 Copies

#### [C] COMPULSORY GUIDELINES REGARDING NCC ADMISSION:

- (a) Physical test and enrollment date will be published later on. Please follow TDB College website for the same.
- (b) It is mandatory to produce all the original documents at the time of interview/ enrollment date and/or admission (as mentioned above)

## Lt. (DR.) GANESH RAJAK

Associate NCC Officer Company Commander Coy-III, TDB College, Raniganj 10 Bengal Bn. NCC, Asansol Sd/-**DR. SHARBANI BANERJEE (MUKHERJEE)**Teacher-in-Charge
TDB College, Raniganj

(Please follow next page for the form)

Appendix 'A' (Revised 2019)

#### FOR M-I

# NATIONAL CADET CORPS

SD/SW ENROLMENT FOR M (See Rules 7 and 11 of NCC Act, 1948)

| 1. Name (In Block Letters)   | # H |      |                    | Please attested your recent passport size Color photo |
|--|-----|------|--------------------|---|
| Nationality & Date of Birth     (DD/MM/YYYY)                                       | 1   |      |                    |   |
| 3. Father's/Guardian's Name  |     | TV . |                    |   |
| 4. Mother's Name   |     |      |                    |   |
| 5. Residential Address<br>(Landmark, State, Distt.<br>Taluka, City/Vill, pin Code) |     |      |                    |   |
| 6. Mobile No.  |     |      |                    |   |
| 7. E-mail id   |     |      |                    |   |
| 8. Blood Group   |     |      |                    |   |
| 9. Sex   |     |      |                    |   |
| 10. Nearest Railway Station  | ו   |      | (                  |   |
|  |     |      | $(c_{-1}, c_{-1})$ |   |

| 11. Nearest Police Station  |     |
|---|-----|
| 12. Educational qualifications & Marks in (%)   |     |
| 13. Identification Marks (at least two)   |     |
| 14. Have you ever been convicted by a criminal court & if so in what circumstances and what was the sentence?  Attach relevant documents. |     |
| 15. Name of School/College and<br>Stream (Arts/Science/Commerce)  |     |
| 16. Willing to be enrolled and Undergo training under the National Cadet Corps Act, 1948  |     |
| 17. NCC Unit to be enrolled in  |     |
| 18. Have you been enrolled in NCC earlier. If Yes. Your Enrolment No.   |     |
| 19. Have you been dismissed from NCC/the Territorial Army/the Indian Armed Forces : Please Provide details:-                              |     |
| 20. Next of Kin with address (with relationship) Telephone No. (o)/(R)(as applicable)   |     |
| 21. Banker's detail/IFSC Code (CADET)   |     |
|   | (2) |

| 22. Bank Acct No of Cadet (WITH BANK MAME)  | A CALCULATION AND A PARTY OF THE PARTY OF TH | 6-1-3-1-18E                          | ye on  | 1                                    |                | 100        | 94   |                               | _          | Ш                                  |
|---|--|--------------------------------------|--|--------------------------------------|----------------|------------|--|-------------------------------|------------|------------------------------------|
| 23. Aadhaar/UID No.   |  |                                      |  | П                                    | Τ              |            | I  | I                             | T RSX      |                                    |
| 24. PAN Card No.(If allotted)   |  |                                      |  |                                      | 715            | 0.00       | 1  | 1                             | 100        |                                    |
| Place :   |  |                                      |  |                                      |                |            |  |                               |            |                                    |
| Date :  |  |                                      |  |                                      | Common Archive |            |  |                               |            |                                    |
|   |  |                                      | (Si  | gnatu                                | re of          | the a      | appl   | ican                          | t)         |                                    |
|   |  |                                      |  |                                      |                |            |  |                               |            |                                    |
|   |  |                                      |  |                                      |                |            |  |                               |            |                                    |
| DECLARA   | TION ON ACCEPT   | ANCE F                               | OR ENF   | ROLM                                 | ENT            |            |  |                               |            |                                    |
|   |  |                                      |  |                                      |                |            |  |                               |            |                                    |
|   | Promise  |                                      | il honor   | 41                                   | d fai          | thfull     | V SE   | erve                          | mv         | acumt                              |
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| Iand abide by the Rules & regulat ability all Parade and Camps whi  | ion of the NATIONA   | L CADE                               | T CORF   | S an                                 | d tha          | t I wi     | II to  | the                           |            |                                    |
| Iand abide by the Rules & regulat ability all Parade and Camps whi  | ion of the NATIONA   | L CADE                               | T CORF   | S an                                 | d tha          | t I wi     | ll to  | the<br>cer.                   |            |                                    |
| and abide by the Rules & regulat ability all Parade and Camps whi  I Solemnly declare that the answ My son /daughter/ward is willing  | ion of the NATIONA<br>ich I may be require   | L CADE<br>d to atter                 | T CORF   | S and y com                          | d tha          | t I widing | II to  | the<br>cer.                   | be         | st of m                            |
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| ability all Parade and Camps whi  I Solemnly declare that the answ My son /daughter/ward is willing  I No claim on authorities for any co   | ver given in this form to fulfill the engager promise that afte ompensation in the   | n are true<br>ment man<br>r the enre | and not complete the complete t | Signat<br>o part                     | of the         | t I widing | office state to a  | o the<br>cer.                 | se a       | st of m                            |
| I Solemnly declare that the answ<br>My son /daughter/ward is willing<br>I   | ver given in this form to fulfill the engager promise that afte ompensation in the   | n are true<br>ment man<br>r the enre | and not complete the complete t | Signat<br>o part                     | of the         | t I widing | office state to a  | o the<br>cer.                 | se a       | st of m                            |
| I Solemnly declare that the answ My son /daughter/ward is willing  No claim on authorities for any concentrations.  Certified that the applicant and he   | ver given in this form to fulfill the engager promise that afte ompensation in the   | n are true<br>ment man<br>r the enre | and not complete the complete t | Signat<br>o part                     | of the         | t I widing | office state to a  | o the<br>cer.                 | se a       | st of m                            |
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| ability all Parade and Camps white I Solemnly declare that the answ My son /daughter/ward is willing I No claim on authorities for any content of Camps/courses and traveling.  Certified that the applicant and he Date of Enrolment | ver given in this form to fulfill the engager promise that afte ompensation in the   | n are true<br>ment man<br>r the enre | e and notice.  column to any injuring Sign and ag  | Signat<br>o part<br>of my<br>ry or o | of the         | t I widing | office office of the office of | o the cer.                    | se a d I v | st of mand that will have training |

#### TO BE COMPLETED BY MEDICAL OFFICER BEFORE ENROLMENT

|   | The state of the s |
|---|--|
| I have examined (Name)  Him / her / unfit for enrolment as a cadet in the NAT | and consider TONAL CORPS.  |
| , ii  | Signature  |
|   | Designation  |
| TO BE COMPLETED BY MEDICA   | L OFFICER BEFORE ENROLMENT   |
| A my Son / Daughter / ward agree to extent his / hengagement made.            | er enrolment for one year and is willing to fulfill the  |
| Confirmed   |  |
| Signature of Principal (COLLEGE)  | Signature of father /Guardian  |
|   |  |
|   | Signature OC unit  |

Note: This form will be retained in the School/College in which the unit located.

### NOMINATION FORM

## FOR MEMBERSHIP OF THE NCC CADET WELFARE SOCIETY

[To be retained NCC Group HQ)

|  | mental andrewater has been all   |   |   |   |   |
|--|--|---|---|---|---|
| AS   | Student of class   |   | of (Name of Coll  | lege)   | ,   |
|  |  |   | on my enrolment   | t with NCC on   |   |
| (Da  | te)  |   |   |   |   |
| with   | h (Name of the unit  |   | apply   | for membership of   | the NCC cadet welfare   |
| So   | ciety & hereby subscribe   | e a sum o   | f Rs. 10/- (Rupees  | Ten only) towards its   | s membership fee.   |
| 2. My  | Father / Mother / Guard  | dians occi  | upation is  |   | and the annual income of  |
| 3. I ur<br>Co<br>par<br>Ma<br>4. I he<br>ind<br>will | mmittee of the above so<br>rticipating in an organize<br>anaging Committee with<br>ereby nominate the followicated & as determined | entitled to<br>ciety in the<br>ed NCC a<br>regard to<br>wing perso<br>by the Go | o financial relief as<br>e event of partial or<br>ctivity. I hereby ac<br>the quantum of bi<br>on / persons who v<br>overning Body / Ma | determined by the G<br>r permanent disablem<br>ccept that the decision<br>anding on me.<br>will receive financial a<br>anaging Committee of | soverning Body / Managing tent sustained by me while on of the Governing Body / ssistance as per the share of the above society, which in while participating in an |
| SI.<br>No.   | Name of the nominee<br>/ nominees<br>(in block letters)  | Age   | Relationship<br>With the<br>Cadet   | Permanent<br>Address<br>the nominee   | Percentage of financial assistance payable  |
|  |  |   | 1 10% to 1  |   |   |
| 540  |  | To be filled  | d by the Cadet in c   | own hand writing)   |   |
| re   |  | velfare So  | ciety and this No   | omination From will b   | e valid only till such time I<br>prolled.   |
|  |  |   |   |   |   |

## Section - II

| Date   |  |
|--|--|
| Place  | Signature of ANO   |
| Sectio   | n -III   |
| I am Willing to allow my son / daughter / ward name<br>member of the NCC Cadets Welfare Society und<br>society. I also approve of the nomination made in Sec | er the terms and condition and rules in force of the                     |
|  |  |
|  |  |
| Place  | (Full Signature of the Father / Mother / Guardian with complete address) |
| Witness  | Witness  |
| 1(Signature)   | 2(Signature)   |
| Full name and address with<br>Office Seal of the Witness   | Full name and address with Office Seal of the Witness                    |
| Note: The witness should be either gazetted office / h Village Head.   | ead of institution / NCC part Time office / Sapanch /                    |
| Section  | n-IV   |
| Received a sum of Rs. 10/- (Rupees Ten only) as one  | time subscription and enrolled as a member of the                        |
| NCC Cader Welfare during the cadetship in the Junio  | or / Senior Division /Wing.  |
|  |  |
| Date   | (Signature of the OC Unit with   |
| Place  | office seal)   |
| Section (To be filled in by  |  |
| Date of Dispatch of the Nomination Form to Group Ho  | 2  |
| 10   |  |