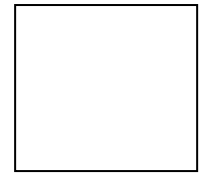




NC-DAP DIVISION
NATIONAL INSTITUTE OF SOCIAL DEFENCE
MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT

Name of the Course.....



1. Name of the Candidate (Mr./Mrs./Miss):

(In Block Letters)

2. Father's Name :

3. Date of Birth :

4. Academic Qualifications :

(Attach attested copies of certificate)

5. Experience :

6. Local Address and Tel. No. :

8. Permanent Address and Tel. No. :

9. Email Id :

10. Name of the Local Guardian :

& Relationships

(Signature of the Candidate)

UNDERTAKING

I hereby undertake that I have read the Rules and Regulation of the National Institute of Social Defence, New Delhi and I shall fully abide by them. I will be regular in attending Classes/Course activities for whole period of _____

In case of default, I shall be liable to pay the total expanses borne by the Government in this connection. I have read and understood these obligations and confirm it by putting my signature below in the presence of guardian.

(Signature of the Candidate)