



JSPM UNIVERSITY PUNE

Inspiring Innovation. Transforming Talent.



Enrollment Form for NSS Volunteers

For the Year 20..... - 20.....

NSS Year: ____ (1st or 2nd)

Name: _____ PRN No. _____

Father's Name: _____

Photo

Mother's Name: _____

Program: _____

Year of Study: 1st Yr. / 2nd Yr. / 3rd Yr. / Final Yr. _____

Faculty: _____ Date of Birth: _____

Category: General / SC / ST / OBC _____ Blood Group: _____

Residential Address: _____

Contact Number: _____ Guardian's Contact No.: _____

Email I'D: _____

OATH

I) I, hereby declare to abide, adhere & promote the values of National Service Scheme.

II) I shall devote a minimum of 120 hours for various NSS activities.

Date:

(Name & Signature of the Volunteer)

(Name & Signature of the Guardian)

(For Office Use Only)

Year of Joining NSS:

Unique ID No.:

Note: Registration fees for a Volunteer is Rs. 50/- .

Verified by:

NSS Officer

NSS Program Coordinator