



CHME Society's
Bhonsala Military College
Dr. B.S.Moonje Marg
Rambhoomi , Nashik -5
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Mob : 9423577512

15th PERSONALITY DEVELOPMENT COURSE for Girls
APPLICATION FORM
Age group: 12 - 15 Years
Duration - 15 Days (14th May to 28th May 2023)

Affix
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Passport
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Photograph

APPLICANT'S INFORMATION			
First Name		Middle Name	Last Name
Date of Birth	/ /	Age	
Correspondence Address			
	State		Pin Code
Phone (R)		Mobile	
Aadhaar		Email	
PARTICULARS OF PARENTS			
Mobile		E-mail	
Father's Name		Profession	
Mother's Name		Profession	
GUARDIAN'S DETAIL			
Name		Mobile	
Relation with the applicant			
Payment Details			
Course Fee : Rs. 25,000 (Non-refundable)			
Demand Draft	D.D. No.:	Date : / /	
Online Payment	Transaction ID:	Date : / /	
FOR OFFICE USE ONLY			
Application received on	Amount Paid	Receipt No.	Signature of cashier
Date : / /			
Course In-charge	Principal	Admitted	Not-Admitted

Declaration by Parent / Guardian

1. I _____ am willing to admit my daughter / ward in the PDC of Bhonsala Military College, Nashik at my own risk and I will not claim any compensation from the authorities in the event of any injury / unusual incident due to any accident during the stay / training / travelling from her date of joining the course.
2. I hereby declare that I have made myself acquainted with the rules and regulations of the PDC and I will ensure that my daughter / ward abide by them as long as she remains in the course.
3. My daughter / ward is mentally and physically fit. The medical fitness certificate from a registered practitioner is attached herewith.

Relationship with Student :	Signature :
Place	Date / /

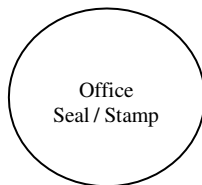
MEDICAL CERTIFICATE

(To be filled in by the Family Physician / Medical officer [M.B.B.S. OR M.D.])

I have medically examined Miss _____ and in my opinion she is fit to undergo the Personality Development Course mentioned above. She is not knock-kneed, epileptic or flat footed and has been duly inoculated/vaccinated. She is allergic to

Height _____ cms Weight _____ kgs. Blood Group _____

Place : _____ Date : / /



Name :

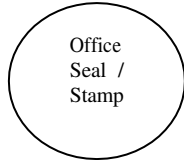
Designation :

Signature :

CHARACTER & BIRTH CERTIFICATE (From Head of institution)

I know _____ personally and to the best of my knowledge she bears an exemplary moral character, I recommend her for the Personality Development Course. Her date of birth as per our records is _____.

Place : _____ Date : / /



Name :

Designation :

Signature :

INDEMNITY BOND AND CERTIFICATE

1. I confirm that my daughter / ward is physically and medically fit to undertake the rigorous training of the course.
2. I also hereby declare that if my daughter / ward leave the college campus without official permission, I will not hold the college authorities, staff or instructors responsible and no refund / compensation will be claimed by me.
3. I will ensure that my daughter / ward adhere to the rules of the course and abide by the directions of the organizing authority or the nominee at all times during the course failing which my daughter / ward shall be liable for expulsion.
4. I hereby declare that to the best of my knowledge, my daughter / ward does not suffer from any ailment or disability likely to handicap her while undergoing the course. She is taking part in this course at her own risk.
5. In case of injury, accident or sickness I or any member of my family shall not hold the college authorities, staff or instructors responsible either individually or jointly and no compensation shall be claimed by me.
6. I am also aware of the fact that the course fee is non-refundable under any circumstances once the admission is confirmed.
7. The Indemnity bond / certificate is given by me with due diligence and on the basis of the information provided to me by Bhonsala Military College authorities.

Signature of the Parent / Guardian

Signature of the applicant

Relationship with the applicant :

Date: / / Place: