OPTION F	ORM
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		Signature of student	
***To be registere	ed in any one out of list provi any one out of list provider	vided over leaf (VI & VIII Sei	
•	in any one out of NCC/NSS/ d in any one out of list provi	, ,,,,	•
ote: See list and Office In	charge of the activities (Ove	er leaf)	
III. ***Study circle	ial Training		
	and Sports:		
rant to register for the fo	ollowing programme:-		
	Class		
rmanent Address			
esent Address			
	S/O/D/C		

Date:

Signature & Name of Officer Incharge Activity