



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

MALDIVES NATIONAL CADET CORPS

Ministry of Education
Republic of Maldives, Male'

SCHOOL CADET COMPANY REGISTRATION FORM

[write in blue or black pen in capital letters]

SCHOOL DETAILS

School Name:			
Atoll:		City / Island:	
Contact Number:		Email Address:	
School Motor:		Inaugurated Date:	

TEACHER IN-CHARGE OF CADET ACTIVITY

Name:		Designation:	
Contact Number:		Email Address:	

Total Number of Cadets:		Proposed Start Date of Activities:
Boys:		
Girls:		

I, the undersigned, certify that the information provided above is accurate to the best of my knowledge. The school agrees to follow the guidelines and rules of the National Cadet Corps in the conduct of cadet activities. We understand the responsibilities and benefits of having MNCC activities in the school and are committed to ensuring the success of the program.

Principal's Name:	Signature:	School Stamp:

MNCC OFFICE USE ONLY

Authorized by:

Commanding Officer	STAMP	Date: DD MM YYYY