



राष्ट्रीय प्रौद्योगिकी संस्थान कर्नाटक सूरतकल



NATIONAL INSTITUTE OF TECHNOLOGY KARNATAKA SURATHKAL

राष्ट्रीय सेवा योजना

NATIONAL SERVICE SCHEME

Office of the Programme Co-ordinator

Consent form for NSS Annual Special Camp

I Mr./Ms _____, Class _____, Roll
No. _____ hereby consented to attend the **NSS Annual Special
Camp** to be held at **Pilikula Nisarga Dhama, Mangalore** from **1st to 7th
December.2018.**

I also affirm that I shall abide by the camp disciplines and will not indulge any
untoward activities during the camp.

Note: All the volunteers need to produce an email in form of “**NO OBJECTION**”
from your parents to the following E-mail ID: nssnitk17@gmail.com

Name of the Volunteer : _____
Address : _____

Email ID : _____
Contact No. : _____
Signature : _____