

INSTITUTE OF INTEGRATED & HONORS STUDIES
KURUKSHETRA UNIVERSITY KURUKSHETRA
National Service Scheme (N.S.S)
Session 2026-27

1. Name _____
2. Father's Name _____
3. Mother's Name _____
4. Date of Birth _____
5. Class _____ Roll No. _____ 6. Category _____
(Gen. /Res. /SC / BC)
7. University Regn. No. _____
8. Are you willing to donate blood? If yes, mention blood group

9. Special Hobbies

10. Social Activities

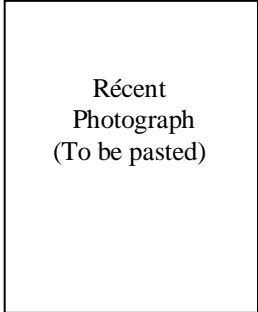
11. Hostel Address

with Phone No. _____

13. Correspondence Address

with Phone No. _____

14. Email Id



I declare that the above information is correct. I shall also abide by all the rules and shall participate in N.S.S. activities selflessly.

Dated _____

Signature of the Volunteer

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Recommendation of the Programme Officer N.S. S.