

**CONSENT FROM: CONSENT OF PARENT/ GUARDIAN FOR  
ENROLMENT IN RESPECT OF CANDIDATES AGE BELOW 18 YEARS**

Name in Full (IN BLOCK CAPITALS) : \_\_\_\_\_

Father's Name : \_\_\_\_\_

Date of Birth : 

D	D	M	M	Y	Y	Y	Y

D O B in words: \_\_\_\_\_  
\_\_\_\_\_

Air Force Roll Number-----

Statement by Parent or Guardian(Refer Note 1)

I certify that the above named is my ----- (Son/Ward)  
has my Full consent to enroll in the Indian Air Force.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name in Block Capitals)

Date : .....  
\_\_\_\_\_  
(Relationship with the candidate)

.....  
.....  
(Address)

Statement by Witness (Refer Note 2)

It is certified that, the form has been completed in my presence

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name in Block Capitals)

Date:----- (Office Seal) \_\_\_\_\_

\_\_\_\_\_  
(Designation)

Note 1. The statement must be signed by the father of the candidate. In case father is not alive, the mother should sign it. In case both are not alive, the statement should be signed by the legal guardian of the candidate,

Note 2 The witness must be a Gazetted officer or the village Sarpanch/Pradhan. He should also attest the photograph of the candidate. (Pasted on the top of this form).