

APPLICATION FOR ASSISTANCE UNDER AWARENESS GENERATION PROGRAMME

1. Name of the Institution and Full Address:
(in Block letters)
2. Phone No. and FAX No:
3. Geographical Area of Operation:
(Rural/Urban/Tribal)
4. Date of Registration:
5. Is the Institution a branch of Parent Organization?
Is it affiliated to another organization?
(if so, attach affiliation certificate)

6. Present activities and area of operation:

Activities	Area
	(Name of Panchayats/Blocks/Districts)

7. Details of previous grants received from CSWB/Govt. of India/State Govt./ Other during the previous 3 years

Source	Year	Amount	Purpose
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8.

Details of staff	Professional	Other	Total
Full Time			
Part Time			
Voluntary			

9. If any Bank Account, state Number of Account, Name of the Bank and Branch and persons authorized to operate:

10. a) Details of Camps for which grant is applied:

S.No.	Proposed location village, taluk/block District	Expected No. of Candidates	Probable period of Camp (No. of days)	Proposed dates

- 10. b) Total Grant requested:
- 10. c) Objectives of Camps: (Mention local problems and issues which will be taken up in camps):

I have carefully studied the scheme, its guidelines, terms & conditions of the sanction stipulated by Central Social Welfare Board, and I, on behalf of the institution undertake to abide by these conditions.

Signature.....
Name.....
Designation.....
Seal.....

Date
Place

Note: Please ensure that all necessary documents are attached with this application form.