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Application Form for NGOs for Financial Assistance from National Children's Fund (NCF)

1.	Name, address and telephone no. of organization	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	91 91 2011/mm1111	20					
2.	Nature of the organization						
3.	Date of establishment of the organization						
4.	Brief history and brief account of the activities of the organization since its inception						
5.	Whether the organization is registered under any law for the time being in force ? If so, the detail thereof						
6.	Whether the organization is of a National/State/District level						
7.	Whether the organization has been recognized as an organization of National or State level? If so, details thereof						
0	Whether the organization is in	470					

T	Also Torres	
	 Any other details regarding the proposed project of the organization 	***************************************
	 Name of the Bank Account, Branch Code etc., where the account of the organization is maintained 	(**************************************
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	 Annual turnover of the organization 	
	Note: A copy of the Articles of the Memorano the Rules and Regulations of the organization of accounts of expenditure of the organization enclosed. List along with the name of Office also be enclosed.	along with a copy of the statement
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Application Form for State Governments/UT Administrations for Financial Assistance from National Children's Fund (NCF)

- 1. State
- 2. Purpose of Grant
- 3. Area of implementation
- 4. Details of Project proposal

Format for Financial Assistance under National Children's Fund (NCF)

i) Name, complete postal address, e-mail address and delegation of the organization (attested legible copy of certificate to be enclosed) Brief Objectives of Organization (attested legible copies of Memorandum of / Constitution and Bye-laws to be enclosed) Whether the Project submitted is covered under objectives of Organization as well as of Brief activities of the organization - current as well as of last three years. Project wise to be submitted in the format given below. SN. Name Years of Funding Amount of Expenditure of Project tation Agency sanctioned beneficiaries incurred project tation Project tation Amount Sanction Amount al year No. and Amount Scheme Scheme No. and Other Sanction Amount of Scheme No. Amount of Scheme No. of Scheme No. Other Sanction of Scheme of Scheme No. Other Sanction of Scheme	::*	2	ω :			. On	, on	7.	EG		ß	la p	
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Details of proposal in	Whether I aggression needing sindicate the	copy of su	Whether the o	Z S	Details o	Office	format g
Details of the proposed brojec proposed indicating tollowing:	her Project subm ssion, difficult or ng special care, he the details	whether survey of the copy of survey report.	he organizat	ne Designation	f staff on the	Hostel	format given below
project for wh wing: -	Whether Project submitted is for chi aggression, difficult circumstances, needing special care, children in the indicate the details.	area of impler	ion has been r	Date	payroll of the	Class/training rooms	
Details of the proposed project for which assistance is sought from the NCF. Please proposed indicating following: -	Whether Project submitted is for children affected by natural calamities, disasters, aggression, difficult circumstances, affected by trafficking, children of prostitute needing special care, children in the unserved and underserved tribal and remote indicate the details.	Whether survey of the area of implementation and potential beneficiaries conducted copy of survey report.	ecognizad as a	of Qualifications	Details of staff on the payroll of the Organization to be submitted in the format gives	ng Workshop facilities	2002
nce is sought from	by natural call afficking, chik underserved	otential bene	an organization	ns Experie nce in the organization	be submitted		
the NCF. Ple	calamities, disasters, di children of prostitutes, rved tribal and remote a	iciaries condu	of National o	Experience in the area for which project submitted	in the format o	vequip	
ase annex detailed	ters, distress, riots, flutes, girl children note areas? If yes,	ucted? if yes, attach	Whether the organization has been recognized as an organization of National or State level ? If so, details thereof	in Gross for monthly ect emoluments	given below: -	Other assets	format given below
7.75		5	9				

What are the sources of 10% Project cost to be shared? What are the sources of 10% Project cost to be shared?
Is the Project of the organization for last three financial years
maintained. Bank Account, Branch Code etc. where the account of the organization is
Central/State Government? If so, give reasons to seek assistance from the NCF
xiii) Project Sustainability – Indicate complete strategy with resources to sustain the Project xiii) Project Budget (must correlate to objectives and proposed activities) Xiv) Any other details
x) Expected outputs
viii) Proposed Activities
vii) Project Rationale
v) Key Parameters for selection of Project
Need and background of the Project
Area of implementation

Note: Copies of the Afticle/Memorandum of Association, Bye-laws/Rules and Regulations of the organization authorizing office bearers for operating Bank Account, Audited Statement of Accounts (comprising of Expenditure Account, Receipt and Payment Account, Balance Sheet and Audit Reports) for the last three fi Annual Reports for last three years, List along with the name of Office Bearers of the organization to be enclose