

APPLICATION CUM MONITORING FORM FOR GRANT-IN-AID FOR ORGANISATIONS UNDER THE SCHEME OF ASSISTANCE TO HOMES (SHISHU GREH) FOR CHILDREN TO PROMOTE IN-COUNTRY ADOPTION.

(For Ist Instalment and New Cases)

1. Financial year for which grant-in-aid is applied
2. Name of the organisation
3. Address of the organisation

(STD Code) Te.No.  
E-Mail

(STD Code) Fax No.  
GRAMS

4. (a) Date of commencement of the Shishu Greh  
(b) Year of commencement of Grant in aid from GOI for the Shishu Greh
5. (a) Name of the Act under which registered, Reg. No. (Please attach a photocopy)  
(b) Date of Registration of the organisation
6. (a) Act under which Licensed License NO. (Please attach a photocopy)  
(b) Licensing Authority  
(c) Validity Period
7. (a) Complete address of location/ locations where programme/scheme is being implemented.

(STD Code) Tel.No.  
E-Mail

(STD Code) Fax No.  
GRAMS

(b) Nearest Railway Station/Bus Stand/  
Airport

8. Whether building is (if rented enclose a : Owned/Rented/On lease/  
copy of rent agreement) (Please indicate donated  
( ) against appropriate box)
9. (a) Is the building being utilised exclusively for this programme?  
(b) If no, provide details of usage

10. (a) Area of building (in sq. meters) .....Sq. meter  
 (b) Number of rooms  
 (c) Average floor area allowed to each child for sleeping  
 (d) Whether cots are used or whether children sleep on floor.

11. Registration under Foreign Contribution Act

12. Memorandum of Association and Bye-Laws (Please attach a photocopy)

13. Name and address of the Members of the Board of Management/Government Body.  
 (Date on which it was last constituted and for which period?)

14. Whether separate project-wise accounts have been maintained for grants sanctioned earlier? Yes/No

15. Whether principle of joint operation of banks Accounts is being followed? Yes/No  
 (Separate Bank Account should be maintained)

16. Details of bank accounts in which grant-in-aid released during previous financial year:

Sl No.	Grant in aid for financial year	Sanction letter Number	Date	Recurring amount	Non-recurring amount	Bank A/c No.	Name & Address of Bank/ Branch	Person operating the joint account

15. Whether the statements of accounts are submitted along with the application Audited/Unaudited  
 (Please indicate ( ) against appropriate Box)

16. The amount of support sought from the Ministry for recurring grant-in-aid  
 (a) Recurring  
 (b) Non-recurring  
 (c) Total

17. Details of the scheme for which the grant in aid is being applied.

20. No. of cases wherein legal expenses were incurred (enclose receipts for the fees paid.)

**LIST OF DOCUMENTS TO BE SUBMITTED ALONG WITH APPLICATION FOR 1ST INSTALMENT.**

21. Whether List of beneficiaries and Number of children placed in adoption enclosed.	Yes/No
22. Whether list of Members of the Board of Management/Governing body enclosed.	Yes/No
23. Whether details of staff enclosed (appendix-1)	Yes/No
24. Whether rent agreement enclosed	Yes/No
25. Whether Registration Certificate enclosed	Yes/No
26. Memorandum of Association and Bye-laws	Yes/No
27. Whether the receipt of the fees paid for legal expenses are enclosed	Yes/No
28. Accounts in 4 parts for the project for which grant-in-aid is sought and for the organisation as a whole.	Yes/No
(i) Income & Expenditure statement	Yes/No
(ii) Receipt & payment statement	Yes/No
(iii) Balance Sheet	Yes/No
(iv) Auditors Report	Yes/No
29. Activity/Annual Report of the Organisation for the previous year	Yes/No
(i) Budget Estimates for the project for current year.	Yes/No
(ii) Details of beneficiaries on Form-I	Yes/No
(iii) Details Managing Committee on Form-II	Yes/No
(iv) Details of Employee on form -III	Yes/No
(v) Memorandum of Association/bye-laws/ Articles.	Yes/No
30. Utilisation Certificate in respect of grants released in the previous year.	Yes/No
31. List of additional paper if any given	Yes/No

**NOTE:** In the case of new projects accounts should be audited and the accounts submitted for the last three years. In addition to the above documents please enclose the following;

- Accounts should be audited and account submitted for last 3 years.
- Progress Report for the last 3 years.
- List of beneficiaries and no. of children placed in adoption for last 3 years.
- State Government recommendation along with an Inspection Report.
- Annual Report for the last 3 years.

## VERIFICATION

Certified that above information is in accordance with the records and accounts audited/to be audited and is correct to the best of knowledge and belief of the office-bearers of the organisation, and after its perusal and satisfaction, they have authorised the undersigned by a resolution dated..... to verify and submit the statement of information for purposes of monitoring the scheme for which grants-in-aid was received from the Ministry of Social Justice and Empowerment, Government of India.

2. I also hereby certify that I have read the rules and regulations of the scheme and I undertake to abide by them. On behalf of the Management, I further agree to the following condition:-

- (a) All assets acquired wholly or substantially out of the central grant shall not be encumbered or disposed of utilised for purposes other than those for which the grant is given. Should the organisation cease to exist at any time, such properties shall revert to the Government of India.
- (b) The accounts of the project shall be properly and separately maintained. They shall always be open to check by an officer deputed by the Government of India or the State Government. They shall also be open to a test check by the Comptroller and Auditor General of India at his discretion.
- (c) If the State or the Central Government have reasons to believe that the grant is not being utilised for approved purposes, the Government of India may stop payment of further instalments and recover earlier grant in such manner as they may decide.
- (d) The institution shall exercise reasonable economy in its working especially in respect of expenditure on building.
- (e) Progress reports on the project will be furnished at regular intervals as may be specified by the Government.
- (f) The organisation will bear 10% of the estimated expenditure or the balance of the estimated expenditure on the project as per the guidelines for NGOs only.
- (g) The organisation agrees to make reservation for the Scheduled Castes/Scheduled Tribe candidate/ Disabled persons for appointment against the posts required for the working of the organisation in accordance with instructions issued by the Govt. of India from time to time.
- (h) It is hereby certified that no grant is being received for the same project from any other (Government/private/foreign) sources.

Note: Wherever not applicable, specially in case of new organisations please write - N.A.

Yours faithfully,

Signature of the Authorised Signatory.

Name :  
Designation :  
Address :  
Date :  
Office Stamp :

[illegible]

PART - C

FORM GFR 19

(See Government of India's Decision (7b) under Rule 149 (3)

Assets acquired wholly or substantially out of Government Grants

Register Maintained by grantee institution

Block Account maintained by Sanctioning Authorities

Name of sanctioning Authority.....

1.....

2.....

3.....

4.....

Sl. No.	Name of Grantee Institution	No.& date of sanction	Amount of the sanctioned grant	Brief purpose of the Grant	Whether any condition regarding the right of ownership of Government in the property or other assets acquired out of the grant-in-aid sanctioned	Particulars of assets actually acquired	Value of the Assets as on.....	Purpose for which utilised at present	Encumbered or not	reasons if encumbered	Disposed off or not	Reason & authority, if any, for disposal	Amount released on disposal	REMARKS
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Place

Date:

Signature::

Name of Secretary/President:

Seal of Organisation

Note: In case there is no change from the previous year a photocopy of the statement of the previous year be furnished with the following statement "No change from the year....."

Singed.

APPENDIX - I MINISTRY OF SOCIAL JUSTICE & EMPOWERMENT

The scheme:

Details of the Staff employed

Previous Year

Name of the Organisation

Name and address of the project

Year

Name & Address	Educational Qualification	Date of appointment	Period for which employed during the year	Salary per month	Total salary paid during the year	Remarks
1	2	3	4	5	6	7

I (current year): (i) Only notify change from the previous year.

(ii) In case there is no change in part I from the previous year, please certify as follows:

"No change in Staff particulars from the previous years"

MINISTRY OF SOCIAL JUSTICE & EMPOWERMENT

APPLICATION FORM FOR 2<sup>ND</sup> INSTALMENT

(To be submitted in duplicate)

1.Name of the

Organisation.....

Complete Address of location/locations

where programme/scheme is being

implemented.

(STD Code) Tel.No.....(STD code)Fax No.....

E-Mail.....GRAMS.....

2. Grant-in-aid applied for:

Recurring

Non-recurring

1.Applied in the current year

2.Received as Ist Instalment

3.Applied for 2<sup>nd</sup> Instalment

3.Annual Report of the previous year

4.Audited statement of account of  
previous year

I.Receipt and payment Statement

II.Income & Expenditure Statement

III.Balance Sheet

IV.Audited utilisation certificate

with itemwise expenditure as per

the sanctioned items of grant.

5.State Government recommendation  
along with Inspection Report.

6.Assets acquired wholly or substantially  
out of government grants under GFR 19

7.Details of staff (Refer to Appendix I).

8.List of children present in the home along  
with details of Names, Sex, DOB, how  
acquired, date of registration in the home,  
(please enclosed as per Part-B format)

9.List of children placed in adoption along  
with details of names and address of  
adoptive parents. (Please enclose as per  
Part-B format).

10.Budget estimate.

11.Rent Agreement

12.Progress Report

13.No. of cases wherein legal expenses  
were incurred (enclose receipts for the  
fees paid)

14.Any other information considered  
necessary by the organisation or as  
asked for.



15. Whether the organisation is receiving or expecting to receive any grant from some other source for the project for which application is being made?

### VERIFICATION

Certified that above information is in accordance with the records and accounts audited/to be audited and is correct to the best of knowledge and belief of the office-bearers of the organisation, and after its perusal and satisfaction, they have authorised the undersigned by a resolution dated..... to verify and submit the statement of information for purposes of monitoring the scheme for which grants-in-aid was received from the Ministry of Social Justice and Empowerment, Govt. of India.

I also hereby certify that I have read the rules and regulations of the scheme and I undertake to abide by them. On behalf of the Management, I further agree to the following conditions:-

(a) All assets acquired wholly or substantially out of the Central grant shall not be encumbered or disposed of or utilised for purposes other than those for which the grant is given. Should the organisation cease to exist at any time, such properties shall revert to the Government of India.

(b) The accounts of the project shall be properly and separately maintained. They shall always be open to check by an officer deputed by the Government of India or the State Government. They shall also be open to a test check by the Comptroller and Auditor General of India at his discretion.

(c) If the State or the Central Government have reasons to believe that the grant is not being utilized for approved purposes, the Government of India may stop payment of further instalments and recover earlier grant in such manner as they may decide.

(d) The institution shall exercise reasonable economy in its working especially in respect of expenditure on building.

(e) Progress reports on the project will be furnished at regular intervals as may be specified by the Government.

(f) The organisation will bear 10% of the estimated expenditure or the balance of the estimated expenditure on the project as per the guidelines for NGOs only.

(g) The organisation agrees to make reservation for the Scheduled Castes/Scheduled Tribe candidate/Disabled persons for appointment against the posts required for the working of the organisation in accordance with instructions issued by the Government of India from time to time.

(h) It is hereby certified that no grant is being received for the same project from any other (Govt./private/foreign/sources).

Yours faithfully,

Signature of the Authorised Signatory.

Name :  
Designation :  
Address :  
Date :  
Office Stamp :