

FORM A

(Scheme to provide financial assistance to Organize Programmes by Organization/NGO)

To,
The Director,
Directorate of Tribal Welfare,
Shrama Shakti Bhavan, Patto, Panaji-Goa.

Date:-

Sub.:- Financial Assistance under Sahayata Scheme.

Sir,

We propose to organize _____

under the **Sahayata** Scheme for which details are given as under:

1. Name of the Organization/NGO : _____
2. Address of the Organization/NGO : _____
3. Contact No.: _____
4. No. and date of Registration with the competent authority(copy enclosed) : _____
5. Brief History of the Organization/NGO : To be attached
6. Details of proposed activity : To be attached
7. Details of financial implication giving itemwise breakup : To be attached
8. Tentative schedule of the activity : _____
9. Venue identified of the proposed activity : _____
10. Number of participants expected : _____
11. Level of participant : _____
12. Resource persons available/to be arranged with their names and addresses : To be enclosed
13. Bank Details of the Applicant/NGO;-
 - a) Name of the Bank:- _____
 - b) Branch Name:- _____
 - c) Account No:- _____
 - d) Account type:- Savings/ Current.
 - e) MICR Code:- _____

(Signature)
President/Chairman.

Signature
**(Secretary)Official Stamp of
Organization/NGO**

Documents to be attached:

1. Brief History of the Organization/NGO.
2. A copy of Registration Certificate issued by competent authority.
3. A copy of Bank Pass Book of the Organization/NGO.
4. Resolution by the Executive Committee of the Organization/NGO.
5. Audited/Un-audited statement of last two years.
6. Details of proposed activity.
7. Details of financial implication.

N. B. : The amount of financial assistance under this scheme will be provided to the tune of Rs. 50,000/- or 80% of the cost whichever is less and the same cannot be claimed as a matter of right. The amount sanctioned under this scheme shall be utilized for the purpose for which it has been sanctioned and the Utilization Certificate as per GFR-19 shall be submitted to them Directorate of Tribal Welfare within a period of 15 days after the date of organization of the activities.

FORM B

(Scheme to provide financial assistance to Organize Programmes by Committee Constituted under Forest Rights Act)

To,
The Director,
Directorate of Tribal Welfare,
Shrama Shakti Bhavan, Patto, Panaji-Goa.

Date:-

Sub.:- Financial Assistance under Sahayata Scheme.

Sir,

We propose to organize _____

under the **Sahayata** Scheme for which details are given as under:

1. Name & Address of the Applicant : _____
2. Name of the Committee Constituted under Forest Rights Act : _____
3. Details of the members of the Committee: _____
4. Resolution details of the Committee to conduct programme under Sahayata : _____
5. Nature of the Programme Proposed: _____
6. Reasons for conducting programme & expected outcome for the programme to be conducted: _____
7. Details of proposed activity : To be attached
8. Details of financial implication giving itemwise breakup : To be attached
9. Duration & Tentative schedule of the activity : _____
10. Venue/ Geographical area identified of the proposed activity : _____
11. Number of participants/Target group expected : _____
12. Level of participant : _____
13. Resource persons available/to be arranged with their names and addresses : To be enclosed
14. Bank Details for ECS of the benefit amount:-
 - a) Name of the Bank:- _____
 - b) Branch Name:- _____
 - c) Account No:- _____
 - d) Account type:- Savings/ Current.
 - e) MICR Code:- _____

Seal & Signature
Chairman/ Secretary
Of the Committee constituted
Under Forest Rights Act.

Seal & Signature
Secretary
Village Panchayat _____

Recommended by the BDO of _____

(Signature)
BDO

Documents to be attached:

1. Brief History of the Constitution of the Committee under Forest Rights Act.
2. Details & Date of Constitution of Committees/Forest Rights Committee & the Composition of members of the Committee should be provided in the amended Rules 2012.
3. Resolution by the Committee.
4. Details of proposed activity.
5. Details of financial implication.
6. Bank Account Details for ECS Transfer

N. B. : The amount of financial assistance under this scheme will be provided to the tune of Rs. 50,000/- or Actual cost whichever is less and the same cannot be claimed as a matter of right. The amount sanctioned under this scheme shall be utilized for the purpose for which it has been sanctioned and the Utilization Certificate as per GFR-19 shall be submitted to the Directorate of Tribal Welfare within a period of 15 days after the completion of the proposed activity.

FORM C

(Scheme to provide financial assistance to Organize Programmes by Village Panchayats)

To,
The Director,
Directorate of Tribal Welfare,
Shrama Shakti Bhavan, Patto, Panaji-Goa.

Date:-

Sub.:- Financial Assistance under Sahayata Scheme.

Sir,

We propose to organize _____

under the **Sahayata** Scheme for which details are given as under:

1. Name & Address of the Applicant: _____
2. Name of the Village Panchayat : _____
3. Details of the members of the Village Panchayat: _____
4. Resolution details of the Village Panchayat to conduct programme under Sahayata
: _____
5. Nature of the Programme Proposed: _____
6. Reasons for conducting programme & expected outcome for the programme to be
conducted: _____
- _____
- _____
7. Details of proposed activity : To be attached
8. Details of financial implication giving itemwise breakup : To be attached
9. Duration and Tentative schedule of the activity : _____
10. Venue/ geographical area identified of the proposed activity : _____
11. Number of participants/ target group expected : _____
12. Level of participant : _____
13. Resource persons available/to be arranged with their names and addresses : To be enclosed
14. Bank Details for ECS of the benefit amount:-
 - f) Name of the Bank:- _____
 - g) Branch Name:- _____
 - h) Account No:- _____
 - i) Account type:- Savings/ Current.
 - j) MICR Code:- _____

(Signature)
Sarpanch of Village Panchayat.

Signature
(Secretary) of Village Panchayat

Recommended by the BDO of _____

(Signature)
BDO

Documents to be attached:

1. Resolution of the Gram Sabha.
2. Details of proposed activity.
3. Details of financial implication.
4. Bank Account Details for ECS Transfer

N. B. : The amount of financial assistance under this scheme will be provided to the tune of Rs. 50,000/- or Actual cost whichever is less and the same cannot be claimed as a matter of right. The amount sanctioned under this scheme shall be utilized for the purpose for which it has been sanctioned and the Utilization Certificate as per GFR-19 shall be submitted to the Directorate of Tribal Welfare within a period of 15 days after the completion of the proposed activity.