

SAAKSHAR BHARAT  
GOVERNMENT OF INDIA  
MINISTRY OF HUMAN RESOURCE DEVELOPMENT  
DEPARTMENT OF SCHOOL EDUCATION & LITERACY  
NLM.4 Section  
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**Proposals from Non-governmental Organisations for Innovative Proposals in the field of Adult Education.**

Ministry of Human Resource Development, of School Education and Literacy invites applications in prescribed format (annexure) from non-governmental organizations viz., Registered Voluntary Societies, Public Trusts and Non-profit making Companies in existence for three or more years for implementing innovative proposal in the field of Adult Education. The NGOs should be registered with the NGO Portal of the Planning Commission. The scheme shall be in operation till 31.3.2012 unless decided otherwise by the Government of India. The grant of financial assistance will be subject to the guidelines of the scheme. National Literacy Mission Authority retains the right to reject any application, withdraw the proposal or change the guidelines at any time without any notice in this regard. Details of the Scheme of Support Voluntary Agencies for Adult Education and Skill Development could be obtained from the website of the Ministry at [www.nlm.nic.in](http://www.nlm.nic.in) .

2. Application complete in all respects may be sent to the Under Secretary (NLM.4), National Literacy Mission Authority Ministry of Human Resource Development, Department of School Education and Literacy, Room No. 407 'C' Wing, Fourth Floor, Shastri Bhawan, New Delhi – 110 001 in the prescribed format within one month from the date of publication of the advertisement by Registered Post/Speed Post (not by hand or courier). A copy of the proposal may also be sent to Education Secretary dealing with Adult Education of the concerned state government for onward transmission to this Ministry with the comments including capability & credential of the Non-governmental Organization (NGO) of the state government on the proposal. Those who have submitted their proposals earlier are required to submit a fresh proposal.

**APPLICATION FORM**

1. Name of the Voluntary Agency .....
2. Post Address of the voluntary Agency .....  
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- 2.1 District and State/UT where situated .....  
Pin .....
3. Contact Person: (Name) .....
- 3.1 Telephone .....(O) ..... (R)  
Fax No. .... Telex ..... Gram .....  
e-mail .....
4. Nature of Voluntary Agency  
(i) Public Trust  
(ii) Association  
(iii) Non Profit Organization  
(iv) Others
5. i) Registration Number .....  
ii) Year of Registration .....
6. Whether All India Organization Yes or No  
If yes, please furnish information as per guidelines
7. (a) Does the organization have any previous experience in adult literacy work ?  
(b) If yes, was any grant sanctioned from Government of India ?  
(c) If yes, give details as shown below

Sanction No. and Date	Area of Operation i. Block ii. No. of Panchayat iii. No. of Villages/ Programmes	No. of Adult Education Centre, if Center based programme	Period of Implemen-tation	Whether accounts sent or not

8. Whether the office of the organization is located in own building or rented building? Please indicate the accommodation available.
9. If the headquarters of the voluntary agency is far away from the proposed project area, complete address of the place where the sub-office or branch office will be located in the proposed project area.
10. List of documents to be attached:
  - (a) Attested copy of Registration Certificate
  - (b) Copy of Memorandum of Association
  - (c) Copy of Articles of Association
  - (d) List of members of Governing Body with address and occupation (latest)
  - (e) Audited account for the last three years namely receipt & payment Account and Income & Expenditure Account
  - (f) Copy of latest Balance Sheet
  - (g) Copy of latest Annual Report
  - (h) Proceedings of Board of Management/Executive Committee during the preceding year.
  - (i) Proof of Registration with the NGO Portal of Planning Commission.
11. Brief History of the Agency, list objects and activities.
12. Brief summary of the activities taken up and the results achieved during previous year.
13. Additional papers/information, if any.

#### CERTIFICATE

Certified that information furnished is correct to the best of my knowledge.

Signature of the Authorized Signatory  
of the Voluntary Agency

Place .....

Date .....