

Form 1

❖ **Application form of Financial Assistance to Voluntary organizations / Academic Institutions for conducting programme at various places of India.**

To,
The Director,
National Council for Promotion of Sindhi Language
West block - VIII, Wing No. -07, First Floor
Sector – 01, R.K Puram
New Delhi – 110066

Sir,

- (i) I submit herewith an application (in duplicate) for a grant under the scheme of "FAVO
- (ii) I certify that I am competent to sue and be sued in the name of the applicant voluntary organization in accordance with the registered Memorandum of Association of the Voluntary Organization.
- (iii) I further certify that I have read the provisions & conditions of Assistance of the above- mentioned Scheme and that I undertake to abide by them. Details are as follow:

1. Name of the applicant with full address: -
(Attach a copy of Bio-data in case of scholar)
2. Topic of Seminar/Conference/Workshop etc.: -
3. Proposed date and Venue: -
4. No. and list of participants: -
5. Estimated Expenditure: -

Sr. No	Heads	Estimated Expenditure
(i)	Booking of hall/Venue Expenses	
(ii)	Stage Decoration, Banners, Posters, Cards	
(iii)	Photography/videography/ Mementos	
(iv)	Sound and Light System	
(v)	Lunch/refreshment/high tea	
(vi)	T.A and Honorarium to Guest, Speaker, Chair, Convener, Poets (Honorarium is restricted to Rs. 2000/- and Local Conveyance of Rs. 1000/-)	
TOTAL-		

(Signature)

Note: Direct Application from any individual will not be considered.

6. Bank Account No. indicating Name of The Bank, Branch Code No. and IFSC Code of the branch: -		
7. Whether the financial assistance received in the last financial year from NCPSL. If yes, details may be furnished:		

❖ **For Schools/ Colleges/ Academic Institutions**

1. Name of Schools/ Colleges/ Educational Institute with Complete Address		
2. Name of Principal/ Head of the Schools/ Colleges/ Educational Institutions with Mobile No.		
3. Date of establishment of organization working/ runs:		

❖ **For Voluntary Organization/Societies/Charitable Endowments/ Trusts**

1. Name of Panchayat/NGO/VO/Society/Trust with complete Address-
2. Name of Chief Executive/ Functionary with Tel.No./Mob. /Fax/E-mail-

(a) Date of establishment of organization working/runs-

(b) Unique ID No. of NGO as generated in <http://ngodarpan.gov.in> or any other document/reference like to support in token of proof (Enclose a copy of Unique ID Number)-

Undertaking:

It is certified that the above information is true to the best of my knowledge and belief. If any information furnished by me is found false at any time, I will be responsible for the same and any decision taken by the NCPSL will be acceptable to me.

1	Name (in Capital): -	
2	E-mail: -	
3	Phone/Mob: -	
4	Office Seal: -	

(Signature)

- ❖ Please read NORMS carefully before filling the form. Incomplete Application form will not be Considered/Accepted.

Note: Direct Application from any individual will not be considered.