FORM -II

NAME OF THE SCHEME:

Details of Office-bearers/ Managing Committee of the organization:

(i) Name of the Organisation:

(ii) Name and address of the Project:

(iii) Year of Grant

Sr. No	Name	Occupation	Address	Tel. No.	Education Qualification	Remarks

Note: (i) The tenure upto which the above management committee will be valid to be indicated and that it has been constituted legally after following the prescribed procedure may be confirmed.In case if any of the above members is an office bearer in any other organisation receiving assistance from the Ministry, this may be suitably indicated.

-Sd-
Secretary/ General Secretary
<NGO Name >