

**Form-I**

NAME OF THE SCHEME:

**LIST OF BENEFICIARIES**

- (i) Name of the Organisation :  
(ii) Name and address of the Coaching Programme :  
(iii) Year :

S.No.	Name of the Mother's Name	Father's/ Birth	Date of	Sex	Edn. Qualification instn.	Address entry in	Date of outcome/results	Remarks about beneficiary
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1.

2.

3.

4.

5.

Sd/-  
Secretary/General Secretary  
NGO NAME

**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 Coaching Programme:
- (iii) Year :

S.No.	Name	Occupation	Address	Tel.No.	Edn. Qualification
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Sd/-  
Secretary/General Secretary  
NGO Name

**Form-III**

NAME OF THE SCHEME :

**DETAILS OF STAFF EMPLOYED IN THE INSTITUTION DURING THE YEAR.**

- (i) Name of the Organisation.
- (ii) Name and address of the Project.
- (iii) Year.

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S.No.	Name and Address	Educational Qualification	Date of Appointment	Period for which employed during the year	Salary per month	Total salary paid during the year.	Remarks
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Sd/-  
Secretary/General Secretary  
NGO Name