NATIONAL CORPORATE SOCIAL RESPONSIBILITY (CSR) FOUNDATION

PROJECT PROPOSAL

APPLICATION FORM

	SUMMARY
Name of Organisation	
Priority Areas	
Field of intervention	
Title of Project	
Project Objective/s	
Main Activities	
Expected Results	
Profile and Number of beneficiaries	
Duration of project	
Total Cost of Project	
Funds Requested	

	1. ORGANISATIONAL DETAILS	
1.a	Full name of	
	Organisation	
	Objects of the	
	Organisation	
1.b	Acronym (if any)	
1.c	Registration	
	Number/Registrar of	
	Association/Companies	
1.d	Postal Address	

1.e			
т.е	Name of person heading		
	the organization /		
	Chairperson		
1.f	Name of contact person		
	for project		
1.g	Contact Details:		
	Tel.:		
	Fax:		
	E-mail address:		
	Website (if any)		
2		BANK ACCOUNT DET	AILS
2.a	Account Name		
2.b	Account Number		
2.c	Type of Account		
2.d	Full name of Bank		
2.e	Names & designations of	Name	Designation
	signatories		
	-		
	-		
	_		
3		ORGANISATION PROFILE &	CAPACITY
3 3.a		ORGANISATION PROFILE & When was the organizatior	
			founded
3.a		When was the organization	founded
3.a		When was the organization	founded
3.a		When was the organization	founded ed its activities
3.a 3.b		When was the organization	founded ed its activities
3.a 3.b	Li	When was the organization	founded ed its activities
3.a 3.b	Li:	When was the organization	founded ed its activities
3.a 3.b	Li: (i) (ii) (iii)	When was the organization	ed its activities
3.a 3.b 3.c	Li: (i) (ii) (iii)	When was the organization	ed its activities

i					
ii					
iii					
iv					
v					
vi					
vii					
viii					
ix					
x					
3.e	What was the organi	zation total ann	ual income and exp	enditure in the last 2 years.	. Submit
	certified financial sta	tements			
	January to December	· 2015	January to I	January to December 2016	
	Income	Expenditure	Income	Expenditure	
4	Background and prot	blem analysis of	project : (In not mo	re than 500 words describe	e the problem
	that the project seek	s to address and	how the proposed	project will address it)	
5			BENEFICIARIES		
5.a	Identify the main tar	get group			
5.b	Indicate what percen	tage of the bene	eficiaries are from t	ne SRM list or from vulnera	ble groups
	(as defined in annex)				
5.c	State the region in w	hich the project	will be implemente	d	

5.d	State the time-frame for implantation of the project			
	Starting Date: Completion Date:			
6		BUDGET		
6A	Materials, Equipment & Furniture	Amount in rupees (Rs)		
i				
ii				
iii				
6.B	Human Resources			
i				
ii				
iii				
6.C	Other Expenses			
i				
ii				
iii				
6.D	Administrative Costs (max 15 %)			
6.E	TOTAL COST OF PROJECT			
i	Amount of funds requested			
ii	Details of other sources of funds			
iii	Materials Furniture & Equipment			
iv	Human Resources			
V	Other Expenses			
vi	Administrative Costs			
тот	TOTAL COST			

7. DECLARATION:

I, the undersigned, being the person responsible for the project certify that the information given in this declaration is correct.

Name:

Designation:

Signature:

Date: