**Project Proposal Format**

1. **Information about the Organization:**

|  |  |  |
| --- | --- | --- |
| Name of the NGO/Organization/ | |  |
| Address for Correspondence | |  |
| Telephone Number(s) | |  |
| Website | |  |
| Head of the Organization | |  |
| Mobile Number | |  |
| E-Mail | |  |
| Contact person for the Proposed Project | |  |
| Mobile Number | |  |
| E-Mail | |  |
| *Registration Details\*:* | |  |
| 1. Registered under what Act? | |  |
| 1. Registration Number | |  |
| 1. Registration Date | |  |
| 1. FCRA Registration Number, if any | |  |
| 1. 12 A certificate no | |  |
| 1. Valid 80 G certificate no | |  |
| 1. PAN Card No. | |  |
| Area of Implementation  [City, Location within the city] /Address | |  |
| Program Duration (from - to) | |  |
| Center Location/Landmark (to be referred as center name in MIS) | |  |
| Overall Programme/Project Goal | |  |
| Area/s of specialized intervention | |  |
| Budget | Total (A) | INR |
| Recurring | INR |
| Non-Recurring | INR |
| Per beneficiary cost | |  |

**Note:**

1. Please submit detailed budgetary requirements in excel format.
2. Proof of Registration (Copy of Registration Certificate/ Attested Copy of Trust Deed or any other such document) must be attached along with the proposal.
3. **Financial Information:**
4. Present Source of Funds:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No.** | **Donor name** | **Since Year** | **Current Year Grant** | **Project Name** | **Operational Area** |
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1. **Project Information:**
2. **An Introduction to the Implementing Organization and its Work:** (Provide an overview of the organization’s work so far (brief history, operational area, target group, nature of intervention etc.] and explain how the work on skill development will bring a positive change in the community of your intervention?) **Introduction, Operations, Vision and Impact created:**
3. **Proposed Project Title:**
4. **Project Location (*full address if already running*):** provide 4-5 key development parameters of the region using a table (Population, literacy rate, key source of livelihood etc.)
5. **Proposed Project Team:** (Please describe the structure and roles of all team members in the proposed project)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Reporting to** | **Roles and Responsibilities** | **Qualification** |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

1. **Quality Control:** (Please describe the measures you propose to take to ensure a high degree of quality in the implementation of the program **Leveraging Technology and Best Business Practices for Effective and Productive Management)**
2. **Project Scalability and Sustainability**

**(**Project related scalability and sustainability aspects)

1. **Project Plan: (**Please describe the project monthly, quarterly and annual plan**)**