

**APPLICATION FORM FOR GRANT-IN-AID DURING
THE FINANCIAL YEAR 2000-2001**

NATIONAL LEGAL SERVICES AUTHORITY

1. Name of the Organization
2. Accreditation Number
3. Registered official Address of the Organization.
4. Registration Number and the date of Registration under the Societies Registration Act (Please attach photo copy of Registration Certificate)
5. The annual budget and Expenditure of the Organization for the last three years (copies of the Audited accounts be enclosed)
6. Sources of funding of the Organization and the extent thereof by:-

Subscription from members(the annual rate of subscription be indicated)

- a. Foreign Agencies (Names and addresses of such Foreign agencies be mentioned)
 - b. State/Central Govt.(name of the Deptt. of the State/Central Govt. be given)
 - c. Any other source of funding.
7. What is the District of operation for the proposed project and Name and address of District Judge?
 8. A brief resume of the work done by the Organization in the Field of Legal Aid/Legal Literacy etc. during the last three years. (Please use a separate sheet, if necessary).
 9. The description of the Project for which grant-in-aid is sought.
 10. The quantum of grant-in-aid requested from this Authority?
 11. Budgetary Estimates of the Project for each major head of expenditure.
 12. The extent upto which the Organization can mobilize Funds from its own sources.
 13. Has the Organization been given grant-in-aid by the erstwhile Committee for Implementing Legal Aid Schemes, or National Legal Services Authority during any of the previous five financial years? If so, the details thereof may be given as under:-

Sl.No.	Financial Year	Amount of grant-in-aid.Rs.	For the purpose of	Whether audited accounts have been submitted. YES/NO
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14. _____
15. If the Organization has not rendered audited accounts and Utilisation Certificates, etc. for the Grant-in-aid sanctioned to it earlier, the reasons therefor.
16. Whether the Organization has submitted the Performance Report in respect of the grant-in-aid sanctioned to it earlier? If not, the reasons therefor?
17. Any other relevant information which the Organization may like to furnish.

Dated: (Signature of the authorized Functionary of the Organization).

18. Recommendations/Observations of the State Legal Services Authority on the project Proposal submitted by the Organization.(To be issued with the approval of Hon'ble Executive Chairman of State Legal Services Authority).
19. Name, designation and address of the Legal Aid Functionary/Judicial Officer who would be required to Monitor the programmes supported by NALSA.

Date: (Signature of Member Secretary)State Legal Services Authority.

Note:State Legal Services Authority to send the Original Application Form to NALSA office after retaining a copy thereof in their office for record and reference purposes.