WOMEN AND CHILD DEVELOPMENT DEPARTMENT HARYANA

(Mission Vatsalya)

Applications are invited for the Grant in Aid for 2024-25 under Mission Vatsalya from Govt./Voluntary/Non Government Organizations running Child Care Institutions in Haryana

- Govt./Voluntary/Non Government Organization should be registered under Juvenile Justice (Care & Protection of Children) Act, 2015, clause 41(1) & Amendment Act, 2021 and working in the field of Child Welfare in Haryana State for at least 3 years.
- Memorandum of Association of Govt./Voluntary/Non Government Organization should specify that the Organization will work without any discrimination on the basis on caste, creed, color, Sex and religion.
- It should be nonprofit organization.

Organizations willing to apply may visit www.wcdhry.gov.in for application form and detailed guidelines for Grant in ald willing NGOs will abide to utilize the Grant in aid as per the guidelines and to work as per the Juvenile Justice (Care & Protection of Children) Act, 2015 and Amendment Act, 2021 Juvenile Justice (Care & Protection of Children) Model rules, 2016 and Amendment Model rules, 2022 made their under. The application forms are to be submitted in the office of concerned District Programme Officer, Women and Child Development up to 19-03-2024 till 5.00 P.M. & District Programme Officer, WCD sent proposal of Grant In Aid with the recommendation of the concerned Deputy Commissioner to the Head Quarter of WCD Haryana Panchkula. No form will be entertained after due date/time.

> Director- cum -Member Secretary, (Mission Vatsalya) Women and child development department, Haryana.

WOMEN AND CHILD DEVELOPMENT DEPARTMENTHARYANA Bays No 15-20, Sector -4, pocket- II, Sector-4, Panchkula Phone No. 0172-2560349

महिला एवं बाल विकास विभाग, हरियाणा (मिशन वात्सल्य)

हरियाणा राज्य में मिशन वात्सल्य के अन्तर्गत बाल देखरेख गृहों को संचालित कर रही सरकारी / गैर / अर्घ – सरकारी संस्थाओं को वर्ष 2024–25 में सहायक अनुदान देने हेतु आवेदन आमन्त्रित किए जाते हैं।

- 1: सरकारी / गैर / अर्ध सरकारी संस्थाये किशोर न्याय (बालकों की देखरेख एवं संरक्षण) अधिनियम, 2015 की धारा 41(1) एवं संशोधित अधिनियम, 2021 के अंतर्गत पंजीकृत होनी चाहिए तथा हरियाणा राज्य में पिछले 3 वर्षों से बाल कल्याण के क्षेत्र में कार्य कर रही हो ।
- 2. सरकारी / गैर / अर्ध सरकारी संस्थायें के ज्ञापन में स्पष्ट तौर पर विवरण होना चाहिए कि संस्था बिना किसी जाति, सिद्वांत, रंग, लिंग भेद एवं धर्म के भेदभाव के बिना कार्य करेगी ।
- 3. संस्था बिना किसी लाभ के उद्देश्य से कार्यरत होनी चाहिए ।

इच्छुक संस्थायें आवेदन पत्र तथा सहायक अनुदान प्राप्त करने हेतू विस्तृत दिशानिर्देश प्राप्त करने हेतु विभाग की वेबसाईट www.wcdhry.gov.in पर देख सकते हैं । इच्छुक आवेदकों को सहायक अनुदान हेतू मिशन वात्सल्य की दिशानिर्देश स्वीकार करने होगें तथा वह किशोर न्याय (बालकों की देखरेख एवं संरक्षण) अधिनियम, 2015 एवं संशोधित अधिनियम, 2021 तथा किशोर न्याय (बालकों की देखरेख एवं संरक्षण) आदर्श नियम, 2016 एवं संशोधित आदर्श नियम, 2022 के अंतगर्त कार्य करेंगे। इच्छुक संस्थायें अपना सहायक अनुदान का आवेदन सभी सम्बन्धित दस्तावेज सहित अपने जिले के जिला कार्यक्रम अधिकारी, महिला एवं बाल विकास के की सांय 5.00 तक जमा करवायें। जिला 19-03-2024 कार्यालय में दिनांक कार्यकम अधिकारी सहायक अनुदान का प्रस्ताव उपायुक्त की सिफारिश सहित निदेशालय को भेजेगीं । अंतिम तिथि के पश्चात् किसी भी आवेदनों पर कोई विचार नहीं किया जायेगा ।

निदेशक -कम- सदस्य सचिव (मिशन वात्सल्य) महिला एवं बाल विकास विभाग, हरियाणा,

महिला एवं बाल विकास विभाग, हरियाणा, बेज न0 15-20, पाकेट न0-II, सैक्टर-4, पंचकूला दूरभाष न. 0172- 2560349

Application form for CCIs/NGO Seeking Grant In Aid

| Δ | INSTITUTIONAL | DETAILS/GENERAL INFORMATION | |
|---|---------------|-----------------------------|--|
|---|---------------|-----------------------------|--|

| 1. 1 | Name of the Institution: |
|------|--|
| 2. I | Name of the Society |
| 3. I | Details of CCI: |
| | Name and Designation of CCI In- Charge |
| | Complete Address |
| | Mobile/ landline No |
| ì. | Email |
| | PAN No |
| | Bank Account No |
| | Name and Branch of the Bank |
| • | IFSC Code |
| . I | Registration Details (Attached Registration Certificate (If any) |
| • | Whether registered under Societies Act 1860/2012 Yes /No |
| | Whether registered under JJ ACT 2015/2000 Yes /No |
| | Registration No Dated |
| | Total Number of children present (Attached detail of each children as per format at (Annexure A) |

- - Female
 - Age breakup of children

| Sr No | Age | Number of Children | | Number of Children | | Total |
|--|-------------|--|------|---|--|-------|
| "Stells of | | Girls | Boys | | | |
| 1. 35 mm. | 0-6 years | The state of the s | | | | |
| 2. | 7-14 years | | | n den kan de en | | |
| 3. | 15-18 years | 1 | | | | |
| r gle r ⁽¹⁾ green were w | Total | 1 2 2 | | | | |
| 4. | 18-21 years | 100 of years of | | 다시 한테를 하였다. 이상 안되다 하게 2000년에 : 0. | | |

B. Status of Children:

Segregation of children

| Sr. | Age group | Yes/No | Remarks |
|-----|--|---------|----------|
| No | | 100 | |
| 1 | Children of both sexes below 10 years to be kept in same home, | | |
| 2 | Separate bathing & sleeping facilities for boys & girls in age group of 5-10 yrs | | 7 2 2 7 |
| 3 | Separate children home for boys & girls in the age group of 7-11 and 12-18 yrs. | | |
| 4 | Separate facilities for children in the age group of 0-5 yrs with appropriate facilities for infants | | |
| 5. | Are there children above 18 years staying there, Give number | * Y (a) | 1, 11, 1 |

| (1) | Sanction capacity of the Home |
|--|---|
| (ii) | No. of new admissions in the current month |
| (iii) | No. of children who have moved out/released |
| (iv) (v) | No. of children referred by CWC/JJB during the month No. of children produced before CWC/JJB during the month |
| (vi) | No. of children as on last day of the previous month |
| (vii). | No. of children with special needs, if yes, give details |
| (viii) | Interventions made for their rehabilitation: |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | |
| (iX) | Are the Individual care plans prepared for account to the second |

C. <u>Infrastructure</u>:

| 1. | Building detail | Rented/Owned |
|----|---|--------------|
| 2. | Are CCTV cameras installed at the entrance | Yes/No |
| 3. | SecurityAdequate Inadequate | |
| 4. | Sufficient space to accommodate the children: | Yes/No |

Space available:

| No. of rooms / dormitories | Details |
|---|---|
| Provision of sick room / medical unit | |
| Counseling room | |
| Recreational / activity room for Children Is there a TV set available with Cable network | Yes No |
| How often are children allowed to view TV | In the evening or any time Yes No |
| Are children playing games indoors | Age appropriate games or not |
| What games are available to them | Yes No |
| Are children playing games outdoors | Yes No |
| Do they have equipments/ accessories to play | Yes No |
| Do children go for picnics/excursions Do they have interactions with eminent personalities Is there a recreation room available to children | Yes No |
| Kitchen / Dining Room Is the cooking area and pantry separate | Yes No |
| Do children get individual thalis, mugs | Yes No |
| glasses | Yes No |
| Are cooking utensils adequate and clean | Yes No |
| Is there a fridge available for children Is there a Oven available for children | Yes No |
| Is there a Gas stove available in kitchen | Yes No |
| Is there a chimney available | Yes No |
| What is the arrangement to keep the gas cylinders | safe / away from children or not Yes No |
| Adequate water supply for washing, cooking | Yes No |
| Adequate drinking water available (RO) | |

| • | Is cooking done my machines or by cook | 300 | |
|---------|--|-----------------------|---------|
| Numb | er of tollets & bathrooms for Children Flush is working | Yes | No |
| 1. | Taps in the wash basin are | Yes | No |
| | functioning | Yes | No |
| | Is the floor slippery | Yes | No |
| | Drains clean | Yes | No |
| • | Drains are clogged | Once or more li | n a day |
| | Fittings for hanging clothes/ towels in place | Yes | No |
| | Cob webs are removed | Yes | No |
| | Door has a latch | Yes | No |
| | Door has peep holes | Yes | No |
| 223 | Frequency of bath a child is allowed | Yes | No |
| file . | Water is adequately available | Yes | No |
| | Adequate numbers of buckets and mugs | Yes | No |
| • | Personal toiletries are provided | Yes | No |
| • | Is washing powder or soap given | Yes | No |
| • | Do children wash their own clothes | Yes | No |
| • | Is there a washer man available | Yes | No |
| • | Is the washing machine functional | | |
| Open s | pace for outdoor activities | | 1 I |
| Class r | ooms | . 14 | = |
| Space | for vocational training | ** 1 4 4 5 19 44 4 74 | |
| | | | |

| P | rei | mi | se | S |
|---|-----|----|----|---|
| | | | | |

| • | poes the nome have a child friendly indoors? | Yes | | No | |
|---|---|------------|------|--------|-----|
| • | How often is the sweeping, swabbing done ? | Twice | а | day | ог |
| | more | | | | |
| • | Are the children involved in cleaning exercise during class hours? | Yes | | No | |
| • | Are the facilities of coolers/ heaters available for children? | Yes | | No | |
| • | Are the doors and windows maintained properly? | Yes | | No | |
| • | Are the rooms and dormitories well ventilated? | Yes | | No | |
| • | Is there an alternate provision for lights and fans when there is no | electricit | y av | /ailab | le? |
| | | Yes | | No | |
| • | Are the outdoors clean, pleasant and child friendly? Clothing/ Bedding/ Lockers/Toiletries provided to the children: | Yes | | No | |

| Frequency of changing to New clothes are stitched bought Are the mattresses give | indergarments | | No |
|---|-----------------------------------|-----------------|--------|
| bought | 9 | Yes | No |
| | l or bought | stitched | or |
| Are the mattresses give | | | |
| | n individually | Yes | No |
| Are pillows given individ | dually | Yes | No |
| Are the mattress and pil | lows clean | Yes | No |
| Do children have separa | te cupboards | Yes | No |
| Are bed sheets and Khes | s avallable | Yes | No |
| Are blankets available in | winters | Yes | No |
| Number of sets provided | on arrival | one/two/three/f | our |
| Frequency of providing n | ew clothes | Monthly/ | |
| Are these sets of same of | olor or different colors? | Same/dif | forest |
| | th individual lockers to keep the | | |
| articles provided to the ch | | t sample of the | |
| Services provided to the | e children: | | |
| Medical facilities/ | Maintenance of | Health | Cards: |
| | | | |
| ernin (n. 1917) | | . 390 | |
| | | | |
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| | | | |
| | | | |
| | | | |

water:

drinking

| Daily | Routine of Children: | | |
|---------------------------|--|----------|------|
| Time | Activities / Schedulle | | |
| Turic | A CONTRACTOR OF THE PROPERTY O | V = 1750 | |
| Morning | | | |
| Day Time | Total Control of the | | |
| Afternoon | | | |
| Evening | | | |
| Late evenin Night | g/ | | |
| • Comp | outer/ Internet/ Phone | | |
| | Is the facility of Computer with internet available? | Yes | No |
| • | Is the facility functional? | Yes | No |
| • | Are the children allowed to use the facility? | Yes | No |
| 1. de 1 | Is the telephone for official purposes only | Yes | No |
| | Are the children allowed to use telephone fixed timing/as required | and | when |
| • | Is the number of Childline (1098) displayed near the phone | Yes | No |
| | Counseling/ Guidance services/special educator/physiotherapist provided : | , etc. | |
| | | | |
| - 1 | | | |
| | provided: | | |

safe

| | *************************************** | | | | |
|----------|---|--------------------|-----------------|---------------------------------------|------------|
| | | | | | facilitles |
| | Recreational | | | | |
| | | | | | |
| | Linkages | developed with | h other ag | encies/ dep | artments: |
| | | | | | |
| | | | | | |
| | Implementat | tion of track | the missing | child pro | ogramme: |
| | - Entries of | children in | track the mis | ssing child | website: |
|))/(| - User Id and | password provided: | | | |
| | | | * | | |
| | | | | | 1 |
| | Other progra | mmes and activitie | s initiated: | | |
| | | | | | |
| | *************************************** | | | | |
| | ******** | | | | |
| | | | | | |
| Е. | Staff Details: | | | | |
| S.N. | Name | Designation | Date of joining | Attendance at the time of visit | Remarks |
| | and the second | | | | |
| 1 | 1 | | | | |
| 2 | | | | | 1 12 |
| 3 | | | | and the second second | a January |
| 4 | 5 × × × × | | | | |
| 5 | | | | | |
| 3 | Adams A. A. A. | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |

| r. lo | Staff | Sanction ed strength as per Mission Vatsalya norms | Salary as per Mission Vatsalya norms per month | Educational qualification | Drawing Salary | On regular /contract or outsourcing |
|----------|--|--|---|---------------------------|-------------------|--|
| 1 | One Office Incharge (Superintendent) | | 33,100/- | | | |
| 2 | One Counsellor | | 23,170/- | | | |
| 3 | One Probation Officer/Child Welfare officer/ Case worker | | 23,170/- | | | Likeria Santa da Santa d |
| 4 | Two House Mother or House Father | | 14,564/- | | | |
| 5 | One Paramedical staff | | 11,916/- | | | |
| 6 | One Store – keeper cum Accountant | | 18,536/- | | | |
| 7 | One Educator | - | 10,000/- | | , | 3 1 |
| 8 | One Art & Craft cum Music Teacher | | 10,000/- | | | |
| 9 | One PT Instructor Cum Yoga Trainer | | 10,000/- | | | |
| 10 | Two Cook | | 99,30/- | | ě | |

NAME OF INSTITUTION/CCI----

| Sr No | Name of the child | Age (D.O.B) | Sex | Educational status | Orphan Singal Parent MR phy Challenged HIV | Haryana | Other State |
|-------|-------------------------|----------------|--------------------|-----------------------|--|---------|----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 1 | | | + = t ₁ | _ | | | , v |

- TOTAL NO. OF CHILDREN:
- TOTAL MALE
- TOTAL FEMALE

INSTRUCTIONS FOR TABLE II

- 1. List of children to be prepared starting from children in the age group 0-6, 7-10, 11-14, 15-18 and above i8 Years'.
- 2. Age is to be calculated from age calculator (available on internet)'Also mention date of birth in the age column'
- 3. In column no.5, mention the class in which the child is studying. 'If the child is not going to school and availing vocational training then it should be mentioned.
- 4. In column no. 6 if a child is for example orphan as well as MR' Physically challenged or HIV, mention both the categories as represented.
- 5. In Column no. 8, mention the name of other State as represented.
- 6. Both the table lists should be signed in the following hierarchy: office in charge of institution) Protection officer (Institutional care), If Specialized Adoption Agency (SAA) then Protection Officer (Non Institutional Care), Verified by DCPO/WCDPO cum DCPO. Both the table lists should have forwarding with signatures of District Programme Officer of the concerned district.
- 7. Separate data is to be prepared for each CCI.
- 8. All pages of the application form are to be signed by the In charge of the CCI

| | Signature |
|-----------------------|------------------------------|
| | Stamp |
| Name (Capital letter) | |
| Personal Aadhar No | and the second of the second |
| Personal PAN no | |
| Residential Address | |

| Children's Committee/ Management Comm | | NO | 1 |
|---|--------------|---|------|
| | YES | | |
| Formation of Children's Committee: Age wise formation of Children's Committee: | | | |
| Age wise formation of Children's Committee Meeting: Frequency of Children's Committee Meeting: | | | |
| Frequency of Children's Committees | **** | | |
| • | YES | NO | |
| Formation of Management Committee: | | | 1. |
| Formation of Management Committee: <u>Date of constitution of Management Committee</u> | e and freque | ency of meetings | neig |
| Date of constitution of Management Community | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | | |
| G. Record Maintenance: | | | |
| | | | |
| taff attendance register | | | _ |
| hildren attendance register | | | |
| Central admission register | | | |
| Individual case file with individual care plan | | | |
| Communication with CWC/JJB | | 1 | |
| Children's suggestion book | | | |
| Children's suggestion box | | | 1 |
| Medical file / medical cards | | | |
| Personal belongings register | | \ | |
| Management Committee - minutes register | . I y | 10 | T |
| Children's Committee - minutes register | | | |
| | | | - |
| Nutrition / Diet File Any other record maintained | | | |

7944/-

7944/-

Two Helper cum Night Watchman preferably Women in Girl child CCI

One

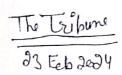
Housekeeper

12

DETAILS OF CHILDREN RESDING IN CCIS

Proforma for Quarterly Progress Report for Physical Report of Children residing in CCIs (To be filled by the Incharge of Institution) & attested by DPO No. of children residing during the Quarter: Capacity: Name of Institution: No. of children left CCI during the Quarter: Quarter: I / II / III Registration No. with Date : Remarks, Individual Computer/ Clothes No. of No. of Vocational Domicile Admission Name of Class DOB / Gender Category Aadhar Address Date of If any Care Plan Name of Child Father's Internet/ Counseling Health Standard Training school Yes / No In School Permane Entry & No. Yes / No Present (F/M) with photograph /Mother's Phone Checksessions Age at | alongwith (Yes/No), where nt / & case no. /Guardian's Age in acre accessibility held ups studying Name of if no, to the Correspo Name | held reasons ndence entry in State thereof Home

Proforma for Monthly Progress Report for Physical Report of Children residing in CCIs (To be filled by Incharge of the Institution & attested by DCPO) No. of children residing during the month: Name of Institution: _____ Capacity: _____ No. of children left CCI during the Month: __ Month/Year: Registration No. with Date : Individual Clothes Computer/ No. of Class Vocational No. of Address | Date of | Domicile | Admission | Name of If any Care Plan Gender Category Aadhar Internet/ Name of Child DOB / Counseling Father's Health Standard Training in School school No. Permane Entry & Yes / No Yes / No Phone (F/M) with photograph /Mother's Present sessions Checkalongwith (Yes/No), where nt/ Age at accessibility & case no. /Guardian's Age : eliastic in held ups studying If no, Name of the Mark Correspo Name 600 held State : reasons ndence entry in 51 2 V 17 Time thereof Home 1000 TURIC .



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(Mission Vatsalya)

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Sd/- Director-cum-Member Secretary, (Mission Vatsalya)
Women and Child Development Department, Haryana.

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H/1128/11/363/2024/25216/31/4