## **APPLICATION FORM**

### Scheme of Financial Assistance for Research Support To Voluntary organisations engaged in Cultural Activities.

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- 1. Application received in an incomplete form will not be entertained.
- 2. Application form may please be filled in neatly.

# Part -I (To be completed by the applicant)

- 1. Name if the Institution/ Organization /Society in Full (in block letters):
- 2. Name of the office bearers
  - . President/Chairman:
  - b. Vice President:
  - c. Secretary/Director:

3.	Complete Postal Address:
4.	Date of Establishment:
5.	Whether registered under Indian Societies Registration Act, 1860 (xxi of 1860), if yes, number and year of Registration.:
6.	Brief details of the Institution/ Organisation, its Objectives and activities.  . Main activities of the Institution (e.g Music, Dance and Drama):

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b.	Whether the institution has a Separate entity or is a unit of a Bigger orgnisation for the purpose Of assets and liabilities:
c.	Whether affiliated to any Organisaion (s):
d.	Whether it is an affiliating boy. If so, details thereof:
	:
	s of activities/projects/ Programmes undertaken during the ree years. :
	her Institution/Organisation/ Society is of all India Character National fame:
	· · · · · · · · · · · · · · · · · · ·
or Of  Detail date 8	National fame:
or Of	National fame:
or Of	National fame:
or Of  Detail date &  Total	National fame:

Research Support To Cultural Activities.

- ii. Sangeet Natak Akademi, New Delhi
- iii. Sahitya Akademi, new Delhi
- iv. Lalit Kala Akademi, New Delhi
- v. Sate Govt/State Akademi
- vi. From other sources.

Whether or not audited statement of Accounts and the Utilisation certificate in Respect of the grant released by this Deptt. On the last occasion have been submitted:

#### I certify and declare that:

- . The particulars of statement made above is true.
- b. The institution will abide by the rules and condition laid down by the Department of Culture: The institution has not applied for any grant for this project from any other source.

Yours Faithfully.

Date:	(Signature of the applicant)
	Name:
Place:	Designation
	Office Stamp:

The application should be submitted in duplicate to the State Government/who will retain the duplicate copy with them for their record and forward the original to the Government of India, Department of culture, A&A Section.

- . Prospectus/Memorandum of Association
- b. Constitution of the Board of Management with Particulars of each member.
- c. Constitution of the Institution/Society
- d. A statement of income and expenditure of the institution/Organisation for the previous three years, and copy of the balance sheet for the previous year certified by a Charted Accountant for a Government Auditor.
- e. Financial statement of the project giving item-wise details of recurring and non-recurring expenditure separate, and the sources from which counterpart funds will be obtained.
- f. Latest available Annual Report
- g. Report of the activity during the last one year.

#### Part -II

#### **Recommendation of the State Government**

1.	The application received from	
is forwarded, duly recommended to the Department of Culture,		
	Government of India with the following comments:	

- i. That the institution/organisation/society is recognised and /or registered under Indian societies Registration Act, 1860.
- ii. That application has been examined and that it is found to be covered under the scheme.
- iii. That assistance has/has not been given by the State Government, in the former case details of grant sanctioned during the last five years for the purpose may be given.

2.

- . Standing of the institution and its main activities.
- b. Details of the project for which the grant has been applied for alongwith the comments of the state Government.
- c. Financial arrangement made by the institution for the project and how far they are in a position to raise further funds from their won resources.
- 3. The State Government recommended that the grants may be given by the Department of culture as per details given below:

Research Support To Cultural Activities.

Name:	Signature
Designation	
Office Stamp:	

Yours faithfully.

Note: The Officer signing this certificate should be of or above the rank of an Under Secretary to the State Government.