

APPLICATION FOR FINANCIAL SUPPORT CUM DUE DILIGENCE FORMAT
FOR ORGANISATIONS RUNNING SCHOOL FOR POOR STUDENTS

Sr. No.	Details Required	Details																								
1.	Name of the Organisation / School																									
2.	Primary / Secondary																									
3.	Address																									
4.	Email address																									
5.	Website address (if available)																									
6.	Name of the Contact person, Address & Phone No. /Mobile No.																									
7.	Date of Registration of organization / school (enclose a copy of Registration Certificate, Trust deed)																									
8.	Details of Trust board /Governing body members																									
	<table border="1"> <thead> <tr> <th>Designation</th> <th>Name</th> <th>Age</th> <th>Occupation</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Designation	Name	Age	Occupation																					
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9.	PAN No. (enclose photocopy of PAN)																									
10.	Do you have Exemption Certificate Under following Section of Income Tax Act available with Organization: 12 A, 80G, 35 AC etc. (give details)	12A: Yes / No (If yes enclose a copy) 80G: Yes / No (If yes enclose a copy) 35AC: Yes / No (If yes enclose a copy)																								
11.	Audited Accounts for of previous year including, Income & Expenditure A/c, Balance Sheet etc. (Please enclose photo copy)																									
12.	No. of employees (full time, part time)	Full Time Employees: Part Time Employees:																								

13.	Number of students class wise			
14.	Class	No. of Boys	No. of Girls	Total No. of students
15.	Details of Major donors in the past two years Name of the Donor, Year, Amount etc.			
	Year	Name of Donor	Amount Rs.	
16.	Brief details of the present proposal			
17.	Amount of financial support requested		Rs.	
18.	Bank account details of the Organisation/ School			
	Account No.			
	Bank Name			
	Branch Name			
	IFSC Code			
19.	Any other details			

Signature:**Name:****Designation:****Date:****Place:**