Prescribed Format for recommendation of District Collector/ District Magistrate under the scheme of “NaiRoshni”, the Leadership Development of Minority Women.

File No. ............................
Government of .......... (Name of State)
Office of District Collector/ District Magistrate
District -..............

To,

The Director (RM&L),
Ministry of Minority Affairs,
Government of India
Paryavaran Bhawan, CGO Complex,
Lodhi Road, New Delhi – 110003

Date: .................

Sub: Proposal of ................. (Name of applicant organization) ................... under “NaiRoshni”, a scheme of Leadership Development of Minority Women during the financial year .................

Please refer the Ministry of Minority Affairs’s advertisement no...................... dated ................. inviting Online proposals through “Online Application Management System (OAMS)” under “NaiRoshni”, a scheme of Leadership Development of Minority Women during the financial year ................. . In this regard, ......................... (Name of applicant organization) ................. has submitted a printed copy of online application to this Office.

2. His documents have been examined and following information about the said organization is authenticated:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Particulars</th>
<th>Information to be filled by Office of District Collector/ District Magistrate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Number of years for which the organization is registered.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Number of years for which the organization is working in the District.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Number of Government projects implemented by the organization for women in the District in last 3 (three) years.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>The organization carries good reputation in the District and is not involved in malpractices.</td>
<td>Yes/ No*</td>
</tr>
<tr>
<td>5.</td>
<td>The organization has experience of working in minority areas.</td>
<td>Yes/ No*</td>
</tr>
</tbody>
</table>

3. The organization is **recommended/ not recommended** for consideration of the project under the scheme *(Please strike out the clause not applicable).*

Yours faithfully,

Signature

(Name of District Magistrate/ Collector)

Official Stamp

**Copy for information to:**
President, ......................... (Name of organization and address).