

SOCIAL JUSTICE DEPARTMENT

Government of Kerala

Application for Enlisting Institutions for Grant in Aid

(Category: Orphanages/Old age Homes/Beggar Homes/P H Homes)

Year of Starting the Home and Completed year of working.....

1. Name and Full Address of the institutions with :
Pincode, Phone Nos.

2. Whether the home or the organization is a :
Registered organization under Travancore-Cochin
Literacy, Scientific and Charitable Societies
Registration Act, 1955 or Society Registration
Act, 1860 or other Acts (Attached copy of the
Registration and receipts from the District
Register showing that the annual reports
& Audited statement have been filed)

3. Orphanage Control Board Registration No & :
Validity Period and sanctioned no of inmates
(Copy attached)

4. Number and validity Period of Recognition under :
PWD Act (Copy Attached)

5. Whether the home is running own building or :
rented building (Attached copy of ownership
certificate or rent agreement)

6. (a) No. of Children between 5 to 21 years studying :
in Recognized educational Institutions
(Copy of the school Attendance Certificate
attached)
(b) No. of inmates staying at the home
(attached full list with address)

7. (a) No. of children having Destitution Certificate :
(Copy of the Destitution Certificate attached)

- (b) No. of inmates having Disability Certificate :
(copy attached)
- (c) No. of inmates having infirm Certificate :
(copy attached)
8. List of Manager and Management committee :
9. Annual Report of the institution/organization :
with list of office beavers.
(Copy of the last 3 years report)
10. Annual Audited report by the Chartered Accountant :
(Copy of the last 3 years)
11. Foreign Contribution Registration certificate of the :
Institution or its parents/affiliated body
(Copy attached)
12. Details of Foreign Contribution received for the :
last 3 years (Copy of the reports furnished to
Ministry of Home Affairs Government for the last
3 years-attached)
13. If any other assistance is received by the institution :
State/Central or LSGD-(furnished the details of
last 3 years)

Declaration

- (1) I have read the grant in aid rules issued by the state government vide and I hereby declare that I will abide by all the conditions of the grant in aid rules and the regulations and guidelines issued by the government and the Director of Social Justice from time to time.
- (2) All the information furnished are true to the best of my knowledge & belief.

Place:
Date:

Signature of the Applicant
Name
Designation

Verification Report of District Social Justice Officer

I have verified all the above mentioned, records and reports and also inspected the institution and satisfied with the functioning. I recommend to include the Home as a grant in aid institution for no. of inmates under the category

Place:
Date:

Signature
Name &
Address