NATIONAL TIGER CONSERVATION AUTHORITY

Guidelines for Non-Governmental and Voluntary Organisations seeking NTCA assistance

October, 2009

National Tiger Conservation Authority
Annexe No. 5, Bikaner House,
Shahjahan Road,
New Delhi-110011.

Website: www.projecttiger.nic.in
## INDEX

1. Eligibility criteria for Organisations seeking NTCA assistance  
   1

2. Documents to be submitted along with the proposal  
   2

3. Organisational Profile of first timer organizations 
   Applying for NTCA assistance  
   3-5

4. Organisational Profile of organizations seeking NTCA Assistance (other than first timer)  
   6-11

5. Format of the project proposal to be submitted by applicants for NTCA assistance  
   12
ELIGIBILITY CRITERIA

The eligibility criteria for NGO/Voluntary Organisations (VO) are as follows:

i) NGO(s)/VO(s) should have been registered under the Societies Registration Act, 1860 or a State amendment thereof or the Indian Trust Act, 1882 or the Religious and Charitable Institutions Registration Act, 1920.

ii) NGO(s)/VO(s) should have completed 3 years from the date of registration on the date of application filed with NTCA.

iii) NGO(s)/VO(s) should have a bank or post office account for at least three years preceding the date of filing of application to NTCA for funding.

iv) NGO(s)/VO(s) should be working in the field of tiger related research/conservation activities.

v) NGO(s)/VO(s) should comply with the requirement of Income-Tax Department (PAN, 12A) or should have at least applied for the same.

vi) NGO(s)/VO(s) should not have been put on the NTCA’s list of organizations to which funding has been cancelled or suspended for acts of omission and commission.

vii) Members of the sanctioning committees of NTCA, namely National Tiger Conservation Authority, Technical Committee of NTCA and Administrative Committee of NTCA or their family members and/or relatives should not be the office bearers of the VOs/NGOs seeking assistance from NTCA.

viii) There should not be more than three ongoing projects under implementation by the NGO/VO with funding by NTCA on the date of application filed with NTCA.
DOCUMENTS TO BE SUBMITTED ALONG WITH THE PROPOSAL
(COPIES SHOULD BE ATTESTED BY A GAZETTED OFFICER)

1. Registration certificate (authenticity of the registration certificate in case of amendments, if any, subsequent to the registration of the NGO/VO.)

2. Annual Report of the NGO/VO for the last 3 years.

3. Audited accounts, viz., Receipt and Payment Account, Income and Expenditure Account and Balance Sheet along with Auditor’s certificate and report for the last three years.

4. Documents relating to PAN number and exemption order under 12A obtained from Income-tax Department or request letters sent to Income-Tax Authorities for obtaining these documents.

5. Bank/Post office pass book reflecting the transactions for the last three years.

6. Certificate from the Bank Manager/Post Master stating that the account is operative for the last three years.

7. The project proposal should be forwarded to NTCA accompanied by a resolution of the organisation duly signed by the sitting members of the NGO/VO.

8. Other documents relevant to specific project proposal.

9. Certificate that the concerned project has not received, is not receiving and will not receive or apply for receiving any funding, either completely or partially, from any other Governmental, non-governmental, international or any other agency, for the same project covering the same beneficiaries.
Organisational Profile of First Timer Organisations Applying for NTCA Assistance

(This Proforma is applicable for small Non-Governmental Organizations / Voluntary Organizations with annual turnover of less than Rs. 2 lakhs for submitting project proposals upto Rs. 1 lakhs).

1. Name of the Organisation ___________________________________________

2. Address:
   a) Village ___________________________________________
   b) Post Office _______________________________________
   c) Taluka ___________________________________________
   d) Police Station _____________________________________
   e) District __________________________________________
   f) State _____________________________________________
   g) Pin Code __________________________________________
   h) Telephone No. ______________________________________
   i) Fax No. __________________________________________
   j) E-mail ___________________________________________

3. In how many villages does the NGO/VO operate?

4. Objective:

5. Details of Registration:
   a) Registration No.: ________________________ Date__________
   b) Valid Upto ________________________________________
c) If registered under FCRA indicate the No.: ____________________
(Attested photocopy of the Registration Certificate to be enclosed)

6. Details of Members

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Name</th>
<th>Father’s/Husband’s/ Wife’s name</th>
<th>Address with Telephone No.</th>
<th>If members are related to each other indicate relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If there is any change in the original executive / governing body of the organization, certified copy of the resolution passed by the Executive Body/Managing Committee of the NGO/VO should be enclosed or supporting evidence should be furnished.

7. Activities undertaken and Experience:

8. Whether the NGO/VO has implemented any project under NTCA assistance in the past. If so give details and status:

9. Main target group:

10. a) Number of Bank Account/Accounts ______________________________

    b) Name of Bank Branches ______________________________

    c) Account Number and type of Account(s) ______________________________
d) Date of opening of account ________________________________

e) Bank Balance(s) as on date of application ________________________

f) Name of the Signatory(ies) _________________________________

g) Relationship of signatory(ies) if any with the Chief Functionary __________

__________________________________________________________

11. Has the NGO/VO ever been placed under funding restriction by any other Funding Agency:-

Certificate

All the above information is true to the best of my knowledge and belief. In case at any stage it is found that any of the above information(s) is incorrect, my application for grant of financial assistance may be liable to be rejected.

Place Seal of the Organisation Signature of Authorised Signatory

Date Name

Designation

__________________________________________________________
PART-A : ORGANISATIONAL DETAILS

1. Name of Organisation __________________________________________________________________________

2-1. Registered Address __________________________________________________________________________

    Block _____________________________________________________________
    Police Station ____________________________________________________
    District ___________________________________________________________
    State ______________________________________________________________
    Pin code ___________________________________________________________

2-2. Details of Branch Office(s) if any. (Append details of Branch Offices on additional sheets, if required.)

    Address __________________________________________________________________________
    Block _____________________________________________________________
    Police Station ____________________________________________________
    District ___________________________________________________________
    State ______________________________________________________________
    Pin Code __________________________________________________________

3. Contact Numbers

    Phone No. (1) __________________________________________________________________________
    Phone No. (2) __________________________________________________________________________
    Mobile Number __________________________________________________________________________
    Telegram ________________________________________________________________
Fax
___________________________________________
E-mail
___________________________________________
Website
___________________________________________

4. Name of contact person(s)

<table>
<thead>
<tr>
<th>Last Name</th>
<th>Middle Name</th>
<th>First Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Designation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.2 Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Designation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Details of Registration (Kindly enclose copy of relevant Registration Certificate(s) (Please put √ against applicable Act)

<table>
<thead>
<tr>
<th>State</th>
<th>District</th>
<th>Societies Registration Act, 1860</th>
<th>Indian Trust Act, 1882</th>
<th>The Religious and Charitable Institutions Registration Act, 1920</th>
</tr>
</thead>
</table>

If Registered under any other Act, please specify

5-1. Registration No. _____________ Date of Original Registration _____________
Registration valid upto __________________________ __________________________

5.2 Details of Foreign Contributions Regulation Act, 1976
(If applicable, kindly enclose copy of certificate)

Date of Original Registration __________________________ __________________________
Original Registration No _____________ Registration valid upto _____________

6. Are there any criminal cases pending against the organizations or office bearers ______(Yes/No). If yes, kindly append details.
7. Details of people’s representatives of the target area (Full name and address to be provided)

7.1 Lok Sabha Member (MP) i) _____________________

7.2 Vidhan Sabha Member (MLA) ii) _________________

7.3 Village Sarpanch / Gram Pradhan iii) _________________

7.4 The Collector & District Magistrate iv) _________________

7.5 Project Director, District Rural Development Agency v) _________________

7.6 Block Development Officer vi) _________________
8. INFORMATION REGARDING MEMBERS OF EXECUTIVE BODY

8.1

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Name/ Address</th>
<th>Category Code</th>
<th>Designation</th>
<th>Qualification</th>
<th>Whether related to other office bearers/NTCA employee is so whom?</th>
<th>Money value of all benefits from NGO/VO (in Rs. per annum)</th>
<th>Age</th>
<th>Occupation</th>
<th>Office held in other NGO/VOs with address</th>
</tr>
</thead>
</table>

1. For Column 3: Category Code : Give SC for Scheduled Caste, ST for Scheduled Tribe and OBC for Other Backward Classes, D for Disabled and O for Others.

2. For Column 6: Give details in format at page 8-2-4.

3. For Column 7: Salary / Honorarium / any other perks / housing / transport

4. For Column 9: Write F for farmer / B for business / G for Govt., semi-govt. employee / H for housewife / P for professional / O for others.
8-2. DETAILS OF FUNCTIONARIES
(This item is to be filled for each office bearer. Kindly use photocopies of this page)

8-2-1. Name of Office Bearer: ________________________________

8-2-2. State whether Office held, in any Other NGO(s)/VO(s) : Yes / No

8-2-3 Details of the Offices held in Other NGO(s)/VO(s) (in case answer to 8-2-2, is Yes)

| Name of the Organisation | : | ________________________ _____________ |
| Address of the Organisation | : | _____________________ ________________ |
| Name of the Organisation | : | ________________________ _____________ |
| Address of the Organisation | : | _____________________ ________________ |
| Name of the Organisation | : | ________________________ _____________ |
| Address of the Organisation | : | _____________________ ________________ |

8-2-4. Details of Relationship with NTCA officials, if applicable.

| Name of NTCA official | : | _____________________________________ __ |
| Designation | : | ________________________________ |
| Office Address | : | ________________________________ |
| Name of NTCA official | : | _____________________________________ __ |
| Designation | : | ________________________________ |
| Office Address | : | ________________________________ |
| Name of NTCA official | : | _____________________________________ __ |
| Designation | : | ________________________________ |
| Office Address | : | ________________________________ |

8-2-5. Are there any members of the family of the chief functionary who receive salary/honorarium from the organizations? If yes, give details.

8-2-6 Please submit details of personal assets of chief functionary.

8-2-7 Is the chief functionary the founder of the organization? If not how many years has he been working in wildlife areas? (Kindly attach his bio-data).
Part-B : Details of Activities undertaken in past 3 years
PROJECT PROPOSAL WITH DETAILS

- Title of the project
- Objectives
- Names and Designation of investigators
- Place / location of study
- NOC from the CWLW of the concerned State
- Physical targets
- Financial projections
- Time frame
- Expected outcome of the project