



भारतीय भाषा संस्थान

(मानव संसाधन विकास मंत्रालय, उच्च शिक्षा विभाग, भारत सरकार)

मानसगंगोत्री, मैसूर - ५७०००६

CENTRAL INSTITUTE OF INDIAN LANGUAGES

(Ministry of Human Resource Development, Dept. of Higher Education, Govt. of India)

Manasagangotri, Mysore - 570 006

SCHEME OF FINANCIAL ASSISTANCE TO VOLUNTARY ORGANIZATIONS FOR PROMOTIONAL ACTIVITIES RELATED TO INDIAN LANGUAGES (other than English, Hindi, Sanskrit, Sindhi and Urdu)

CONFERENCE / SEMINAR / WORKSHOP / ORIENTATION PROGRAMME

APPLICATION FORM

AFFIX A RECENT
PASSPORT SIZE
PHOTOGRAPH
HERE

**Please read the instructions carefully before filling up the application*

1. (a) Name & address of the Applicant Organisation :

for communication (in capitals only)

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PIN

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Telephone no. (with STD Code)

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(b) Permanent of the Applicant Organisation

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(in capitals only)

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Telephone no. (with STD Code)

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Mobile No.

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E-Mail Address

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2. (a) Is the Organization registered under the Societies Registration Act xxi of 1860?

: **YES / NO**

Date & Year of Registration

:

Registration No.

:

Application

(b) Is the organization registered on ngo.India.gov.in?

If so, Date and year of Registration :

Portal ID No. :

3. If the grant is sanctioned, whether the Organization is in a position to meet the balance amount of estimate in excess of the assistance :

3a. If yes, then specify the sources :

4. (a) Theme / Title (in Roman letters) :

(b) In Regional script :

5. Dates of the programme :

6. Venue :

7. Number of scholarly papers submitted :

8. Estimated expenditure on the proposed programme

Items of Expenditure

Estimated Expenditure

a. Rent for venue of programme Rs.

b. T.A/D.A. for participants Rs.

(A copy of the list of participants indicating their designation & address must be enclosed)

c. Honorarium for Scholars Rs.

d. Invitations and postal expenses Rs.

e. Miscellaneous Rs.

Total Rs.

9. Details of Applicant's Savings Bank Account:

(a) Name of the Account holder (as in Bank Pass book) :

(b) Account Number (13 digits only) :

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(c) Name and Address of the Bank :

(d) Branch Name and Code No. :

(d) IFS Code :

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Application

10. Whether you have availed the Scheme earlier? : **YES / NO**

If yes Title and Year of previous grant(s) :

Place:

Yours faithfully,

Date :

Signature

Name :
(in block letters)

Designation & Office seal :

Specimen Signature : i)
ii)

Check List : (Please mark (✓) in the box provided and attach documents accordingly)

- A copy Registration Certificate attested by a Gazetted Officer
- A copy of resolution passed in the board wherein approval to apply for financial assistance in GIA-CIIL is obtained
- Latest prospectus/brochure of the organization
- A copy of the latest annual report of the organization
- A copy of the list of participants indicating their designation & address
- Synopsis of the proposed project/programme
- Identity proof - a copy of Pan Card and any one of Aadhar card / Driving Licence / Pass port.
- Address proof – Election ID
- Cancelled cheque / photocopy of first page of bank pass book containing all the details along with pass port size photograph.

NOTE: (i.) The application which is not in prescribed proforma and without photo, complete information and all enclosures will be rejected without any intimation.

(ii) The processing of this application will take at least six months from the date of its receipt

The filled in application form should be sent to

**GRANT IN AID SECTION
CENTRAL INSTITUTE OF INDIAN LANGUAGES
Manasagangotri, MYSORE – 570 006**