

# NABA PRANTIK



## PARIMAL CHILDREN HOME (BOY'S) / MANGALA CHILDREN HOME (GIRL'S) MANORAMA DRUG DE-ADDICTION & REHABILITATION CENTRE

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I Mr. / Ms. \_\_\_\_\_ Chairperson / President / Chief  
Executive Officer on behalf of the organisation \_\_\_\_\_

wish to apply for membership of NABA PRANTIK. I state that:

- 1) We comply with the terms and conditions of NABA PRANTIK.
- 2) We have filled and enclosed the membership application form of NABA PRANTIK.
- 3) We subscribe to the aims and objects of NABA PRANTIK.
- 4) Mr. / Ms. \_\_\_\_\_ has been nominated as the authorised representative of our organisation to NABA PRANTIK.

### Checklist for application form (Please tick):

1. Filled-in membership application form	
2. A cheque / DD for Rs. 750/- towards membership fee in favour of NABA PRANTIK payable at Chennai	
3. Copy of Memorandum of Association / Trust deed / Article of Association.	
4. Copy of latest Annual report	
5. Copy of latest Audited Statement	

**We request you to consider our application and grant us membership in NABA PRANTIK.**

Date:  
Place:

Signature of Chief Functionary with  
organizational seal

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## MEMBERSHIP APPLICATION FORM

### Organization's Profile

1. CONTACT INFORMATION			
1.1 Name of the Organisation:			
1.2 Full Postal Address:	Door No.		
	Street		
	City		
	District		
	Pin code		
	Phone**		
	Mobile**		
	Fax		
	E-mail*		
Website			
* This email id will be included in the Dgroups email of NABA PRANTIK through which all the information will be shared			
** Please specify which number to be contacted for any communication			
1.3 Working Days:	1.4 Working Hours:		
2. LEGAL DETAILS (Please enclose copy of registration certificate)			
2.1 Registered as	<input type="checkbox"/> Society	<input type="checkbox"/> Trust	<input type="checkbox"/> Sec. 25 Company
2.2 Year of Registration:			
2.3 Registration No.:		2.4 FCRA Number:	
2.5 80G Exemption No:			
2.6 Any other registration details:			

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3. PROFILE OF THE CHIEF FUNCTIONARY	
3.1 Name:	3.3 Designation:
3.2 Qualification:	3.4 Age:
3.5 Residential Address:	Mobile:
	Residential Phone:
	Fax:
	E-mail:
3.6 PROFILE OF THE CONTACT PERSON (If different from Chief Functionary)	
Name:	Designation:
Qualification:	Mobile Number:
Email:	Phone:

4. DETAILS OF ACTIVITY					
4.1 Area of operation					
District(s)					
Block					
Taluk					
No. of Villages / Hamlets					
4.2 Area(s) of Core Activity:					
Sl. No.	Major Category Activity <sup>1</sup>	No. of Years	No. of Beneficiaries	Category <sup>2</sup>	
4.3 NABA PRANTIK has classified its members under different groups. These groups meet regularly and plan the activities. Please mention in which group you would like to be part of. You may select more than one group but only one core group.					
Group Name	Core	Other	Group Name	Core	Other
Children			Community Health		
Women			Community Development		
Geriatrics			Disability		
Environment			Employment		
Others					
<p>1 Example: Agriculture, Animal Husbandry – Live Stock, Child Labour, Education, Environment, Forest – wild life, Health and Family welfare, HIV/AIDS, Labour and Rehabilitation, Legal Education – Consumer Protection, People's Organisations, Physically Challenged, Public Amenities, Rural Division, SC/ST/BC, Science &amp; Technology, Urban Development/ Slum, Village industries, Women Division, Youth affairs &amp; Sports.</p> <p>2 Example: Children, Women, Men, Dalits, Physically challenged, etc.,</p> <p>* If you need to add more information, use separate sheets of paper.</p>					

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### 5. HUMAN RESOURCE

#### 5.1 Details of Staff

Sl. No	Status	Programme staff		Administration Staff	Others	Total
		Supervisory level	Grass root / Field level			
1	Full Time					
2	Part Time					
3	Volunteers					
4	Consultants					
5	Others					
Total						

#### 5.2 Qualification Of Staff

Sl. No.	Status	Below SSLC	Graduates	Post Graduates	Other's specify	Total
1	Full Time					
2	Part Time					
3	Volunteers					
4	Consultants					
5	Others					
Total						

### 6. INFRASTRUCTURE / OTHER RESOURCES

(This is required to make use of the resources for common cause like organizing meetings/trainings and other programmes)

#### 6.1 Availability of Training / Conference Hall:

a) Not Available	
b) Available	
If available, Seating capacity	
Accommodation facility	
Other facilities available	

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7. Please write about your organization in not more than 10 lines. This will be published in all the directories, website and other publications of NABA PRANTIK (If space is insufficient, please write in a separate sheet and attach)

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7.1 What do you expect from NABA PRANTIK and What can you contribute to the NABA PRANTIK network?	
<b>Contribution to NABA PRANTIK:</b>	
- Training venue	
- Mentoring for start up NGOs	
- Technical support	
- Others (Please specify)	
<b>Expectation from NABA PRANTIK</b>	
-	
-	
-	
-	
-	

8. Details of publications of your organization:		
Type	Frequency of publication (Eg. Weekly / Monthly / Yearly)	Willing to share a copy with NABA PRANTIK
- Newsletter		Yes / No
- Magazines		Yes / No
- Reports		Yes / No

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- Others (Specify...)		Yes / No
-		Yes / No
-		Yes / No

9. Details of the Board Members			
Name & Address of Individual	Gender	Occupation	Position in the Board
1.			
2.			
3.			
4.			
5.			
6.			
7.			

10. GENERAL INFORMATION			
10.1 Is your organisation member of any Association, Agency, Foundation, Consortium, Federation, Consultative Group etc., at International / National / State / District level. If yes, give details.			
Sl. No.	Name of organisation	International / National / State / District	From the period of

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### 10.2 Budget of your organisation during the last financial year. (Please tick one)

Below 5 Lakhs	<input type="checkbox"/>	Between 5 – 10 Lakhs	<input type="checkbox"/>	Above 10 Lakhs	<input type="checkbox"/>
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### 10.3 Source of Funds

Source	Programmes / Projects / Activities
Central Govt.	
State Govt.	
Local Donations	
Foreign Contribution	



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11 Does your organisation have branches / sub-centre's? If yes, give details.

Date:

Signature of Chief Functionary with

Place:

Organizational seal

### Terms and Conditions:

- The organisation becomes the member of NABA PRANTIK after it has been accepted/ approved by the advisory committee of NABA PRANTIK which meets once in two months.
- The outcome of the application will be intimated to the applicant within 10 days of the advisory committee meeting
- Annual subscription fee is Rs 750.
- Members should submit, audited statement, annual report every year.
- Non renewal of membership shall amount to cancellation of memberships.
- NABA PRANTIK has the right to cancel the membership if it finds members violating rules and regulations of NABA PRANTIK or any acts which shall not be considered moral and ethical.
- NABA PRANTIK is not a funding agency, however it facilitates funding opportunities for its members.
- Members seeking financial help from NABA PRANTIK shall fill-in separate form which will be given after becoming a member.
- Member should not post any material that is illegal, spam or considered improper by the members.
- Member shall not send any documents or materials without proper virus scanning.
- Members are requested to check the emails daily and be in touch with NABA PRANTIK regularly.
- Member should take earnest interest in participating in the programme of NABA PRANTIK.
- We expect members to contribute and help other members in the network.
- Members should take the responsibility of updating their profile and contact details with NABA PRANTIK.
- NABA PRANTIK has the right to edit the contents given by the members and reserve the right to publish or withhold.