

STATE RESOURCE CENTRE, KERALA

PATTOM. P.O. THIRUVANANTHAPURAM-4

NGO Directory - Data Form

1. Name of the Organisation

2. No. & Year of Registration

3. Whether you have FCRA Registration Yes No

4. Address of the Organisation (with District)

5. Name and Designation of two Contact Persons

6. Tel

7. Fax

8. E-mail

9. Objectives of the Organisation

a)

b)

c)

d)

e)

11. Target Group

a)

b)

c)

d)

12. Funding sources

a)

b)

c)

d)

13. Number of Members 14. Branches/Units if any

15. Major Projects Done and Source of Fund

16. Affiliation with Other Organisations

17. Facilities Available (put /)

a) Building own rented b) Vehicles c) computers
d) OHP e) Xerox Machine f) LCD Projector g) TV / VCR
h) Others

18). Skilled Manpower (Traditional/Modern) available in your organisation.

	Name of the Skill	No. of Persons
a)	<input type="text"/>	<input type="text"/>
b)	<input type="text"/>	<input type="text"/>
c)	<input type="text"/>	<input type="text"/>
d)	<input type="text"/>	<input type="text"/>

19) Overall Annual Budget

a) Below one Lakh b) 1-5 Lakh c) 6-10 Lakh d) Above 10
Lakh

20 Other Details

Date
Place

Signature and Name of the Representative