## PROFORMA FOR INSPECTION OF VOLUNTARY ORGANISATION RECEIVING GRANT IN AID FOR THE WELFARE OF THE OTHER BACKWARD CLASSES

1.	Name of the Scheme :			he Voluntary Organ Backward Classes	nisation
2.	Date of Inspection:	1. 2.	inspection Time of co	M YEAR mmencement of mpletion of	
3.	Composition of the Inspection	on Team :			
Team Comp	Name	De	signation	Agency Represented with address	Signature
1.	Team Leader				
2.	Member				
3.	Member				
4.	Member				
4.	Name and Complete Address of the Organization	s:			
5.	Date of Registration of the o	rganization			
6.	Brief Description of the Proj (Mention the nature of the Co		with duration	of each course and l	nours of daily training)
(a)	Title of the Project :				
(b)	Date of commencement of th	ne Project			
(c)	Year of commencement of C from G.O.I. for the project :	Grant-in-aid			
(d)	Whether the Project is recognithe State Government:	nized by	Yes	No .	

7.	Project Location:	
(a)	Complete Address of location / location where	
	programme / project / scheme is being implemented	
(b)	Distance from the nearest organisation running	
	Operating similar project.	
(c)	Name and Location of nearest Govt. Institution /	
	NGO providing similar services location of	
	such (nearest) project:	
8.	Whether building is RENT or OWNED RENT	TED OWNED
9.	If on rent indicate the name and full particulars	
	or Owner as well as the rent paid per month.	
10.	Is the building space adequate enough	Yes No
	to run the project:	
(a)	Indicate the number of rooms and the	
(a)	size & usage of each	
(b)	Whether the fixtures / fitments e.g. electrical	Yes No
	fittings are in working order.	
11.	Whether separate project-wise accounts have been	
	maintained for grants sanctioned earlier?	Yes No
12.	Whether principle of joint operation of banks	V. N.
	accounts is being followed?	Yes No
13	(a) What are the principal sources of funds of the O	rganisation
	(b) Comment on the Organisation's capacity for add	itional resources mobilisation:

14.		ner the Organisation's is ng user fee / fees :	Yes	No
15.	If YES	S then the details indicating:		
	(i)	the monthly charges		
	(ii)	annual charges		
	(iii)	charges structured on income gradation		
		basis (if any)		
	(iv)	Whether the user charges collected are reflected in the accounts of the NGO	Yes	No

- 16. The following checks may be made:
  - (i) check the entries made on the grants received from the Ministry.
  - (ii) check whether the same has been deposited in their Bank accounts
  - (iii) check the Bank passbook entries to corroborate on entries made as at Sl. No. (i)
  - (iv) check on the pay bill register
  - (v) enquire with those on payroll on disbursement of pay and amount received.
  - (vi) Whether subsidiary accounts of the Government grant is maintained as required by GFR 150(5)

## 17. The number of Trainees / Beneficiaries

		OF	3C	OT	HER
		M	F	M	F
(i)	Number of beneficiaries as per Project sanction				
(ii)	Number found present at the time of Inspection.*				

<sup>\*</sup> Again serial no. (ii) of table, if no. of benefiaciaries were found to be lesser than that was sanctioned, give reasons thereof:

(May also cross-check with other trainees on names / number of absentee trainees)

(i)	Working Ho	urs of th	e centre, give sh	ift-wise break-up :-
	Shift – I	:	Fr.:	То
	Shift - II	:	Fr.:	То
	Shift - III	:	Fr.:	То
	Shift - IV	:	Fr.:	То

18	Information of Process and Procedure of selection	of beneficiaries during the year
(a)	Whether there is a proper application: form for admission to the training	Yes No
(b)	Number admitted during the relevant year :	
(c)	Whether Backward Caste Certificates are obtained :	Yes No
(d)	Mode of selection and broad criterion adopted :	
(e)	The number of training batches conducted annually:	
(f)	Age group of beneficiaries :	15 yrs - 20 yrs
		15 yrs - 20 yrs
		15 yrs - 20 yrs
(g)	Date of commencement of the Batch of Trainees:	1st Batch2nd Batch
(h)	Medium of instruction :	
19.	Total no. of Beneficiaries :  Out of the above :	
	(i) Those passed out of the	
	Institution successfully:	
	(ii) No. of drop outs:	
20.	Details of the training equipment given	
	at the centre	:
		(Are these in working condition ?)
21.	Whether Practical Note Books / Work	
	Booksare maintained by the Trainees	: Yes No
22.	Whether the skills imparted have the	
	potential for gainful self employment	
	or placement	:

23.	trained	no. of Beneficiaries successfully d and have left the Centre during ree years		:				
	Out of	f the above : 7						
	(i)	Those who got employed / placemen	ts	:				
	(ii)	Those who are self-employed		:				
24.	(if 'Ye	ner Trainees have been interviewed s' summary of finding be attached nexure)		:	Yes	No		
25.		ner Composition of Managing nittee enclosed		:	Yes	No		_
	Date o	of last election of the Managing Commi	ittee	:				]
26.	_	ualification held by the teachers / etors to be attached as an Annexure.						
27.	Mainto	enance of records :						
Whethe	er for fo	llowing	Whether	maint	ained	W	hether i	the records
record	s are mo	aintained	in prescril	bed pr	oforma	Ü	are up-i	to-date
(a)	Cash I	Book:	Yes	N	O	Ye	es [	No
(b)	Ledge	r:	Yes	N	O	Ye	es [	No
(c)	Regist	er of Assets:	Yes	N	0	Ye	es [	No
(d)	Regist	er for consumable items:	Yes	N	0	Ye	es	No
(e)	Honor	arium Payment Register:	Yes	N	O	Ye	es	No
(f)	Attend	lance register for trainees:	Yes	N	O	Ye	es [	No
(g)	Year v	vise record of minutes of GBM:	Yes	N	O	Ye	es [	No
(h)	the sal materi mainta Craft,	ner accounts on the proceeds of the of items produced from the raw als funded by the Ministry are mined (i.e. product of trainees of Carpentry, Tailoring, Dari-making ars etc.)	Yes	N	0			

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(	Comments of the Inspection Team on the functioning / implementation of the project :
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•	Specific suggestions by the Inspection Team for the improvement in conducting the programme etc
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	Recommendation of the Inspecting Team on the continued support to the project with specific
	Recommendation of the Inspecting Team on the continued support to the project with specific reference to the relevant year.

Signature
Full Name (In Capital Letters)
Designation
Official Stamp