

**APPLICATION FORM FOR OBTAINING FINANCIAL ASSISTANCE UNDER THE SCHEME  
CHIEF MINISTER YOUTH DEVELOPMENT SCHEME (CMYDS)**

To

The District Planning Officer  
East Khasi Hills District  
Shillong

Affix Passport size  
photo of the  
President of the  
Organization

Affix Passport size  
photo of the  
Secretary of the  
Organization

Sir/Madam

I/We have the honour to apply for Financial Assistance under CMYDS \_\_\_\_\_  
for our organization / Association for favour of your kind consideration. The particulars in support to  
our application are as given below:

1. Name of the Organization: \_\_\_\_\_  
\_\_\_\_\_
2. Registration No. and Date  
Of Registration: \_\_\_\_\_  
\_\_\_\_\_
3. Place of Registration: \_\_\_\_\_
4. Address of the Organization \_\_\_\_\_  
For communication purpose \_\_\_\_\_
5. Telephone/Mobile Number  
(Compulsory) \_\_\_\_\_
6. E-Mail / Website (if any) \_\_\_\_\_
7. Bank Account details  
A/c No. \_\_\_\_\_  
Name of the Bank \_\_\_\_\_  
Branch \_\_\_\_\_  
IFSC Code \_\_\_\_\_

8. Particulars of Assistance received during the last three years with name of the scheme, amount sanctioned and purpose of the assistance.

Sl. No.	Amount (in ₹)	Name of the Scheme	Name of the Department / Office from which the Financial Assistance was sanctioned.	Purpose / Name of the programme for which the Financial Assistance was sanctioned	Whether the Utilization Certificate for the sanctioned amount has been submitted? Yes / No	Brief Report of the Programme Enclosed? Yes/No
1					Yes / No	Yes / No
2					Yes / No	Yes / No
3					Yes / No	Yes / No
4					Yes / No	Yes / No
5					Yes / No	Yes / No

9. Name of the proposal: \_\_\_\_\_

10. Amount Proposed (in ₹) : \_\_\_\_\_

11. Expected Benefits from the Scheme: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Declaration

We hereby declare that the facts stated above are true to the best of my / our knowledge and belief, and I / We agree to abide by the conditions as may be laid down by the Government from time to time in this regard.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Applicants

Name of President: \_\_\_\_\_

Signature with seal: \_\_\_\_\_

Name of Secretary: \_\_\_\_\_

Signature with seal: \_\_\_\_\_

---

The following are the list of documents to be enclosed with this application form:

1. Attested Copy of Registration Certificate.

**\*\*\*\* Please note that (*The Registration should be a valid one, proposals with invalid/ un-renewed Registration Certificate will be summarily rejected*).**

2. List of the members of the Association / Organization (in original and signed by President / Secretary)
3. Attested copy of Election Photo ID Card of President & Secretary.
4. Latest Annual Report on the activities of the Association / Organisation (Not more than two years before the year of application)
5. Latest Audited Accounts Statement
6. Write up on the proposal
7. Budget Estimate (Budget Break -up) of the Piroposal

**\*\*\*\* INCOMPLETE APPLICATION FORMS WILL BE SUMMARILY REJECTED**

**THIS PART IS FOR THE BLOCK DEVELOPMENT OFFICER (BDO)**

**BDO's Report on:**

**Status / views / observations of the Organization:**

---

---

---

---

---

---

---

**Date:** \_\_\_\_\_

**(Signature & Seal of the Block Development Officer)**

**Name of the C & RD Block:** \_\_\_\_\_