SAAKSHAR BHARAT AWARDS 2017

Application form for Resource Support Organizations - (Jan Shikshan Sansthan)

(Information should be provided for the year 2014-15, 2015-16 and 2016-17)

Basic Information

i.	Name of the Organization:
ii.	Mailing Address:
	Telephone Nos.:e-mail:
iii.	Act under which the organisation is registered:
iv.	Year of registration: Registration No.:
v.	Year of establishment of JSS:
vi.	Name of the contact person:
	Designation: Mobile No
	Telephone: Fax: e-mail:
	Website, if any:

vii. Coverage

Sr.No.	District covered		Whether		Whether inc	luded in SB
		Rural	Urban	Tribal	Y	N

1. Governance and Infrastructure

1.1 Details of Committee

Sr. No.	Name of the Committee	Const	ituted	Date of Constitution	Date of meetings held	Whether Minutes are maintained	Actio taken report availa	t
		Yes	No				Yes	No
1	Board of Management							
2	Executive Committee							
3	Programme Advisory Committee							
4	Staff Selection Committee							
5	Finance Committee							
6	Purchase Committee							
7	Any other, pl. specify							

Nature of appointment of Director:	
Full time Part time Addl.Charge In-charge	
Deputed Any other, pl. specify	
Procedure followed for the appointment of the Director: Direct appointment	
Through advertisement Through interview	
Through advertisement and interview	
Whether action plan approved ? : Yes / No	
Did you follow approved action plan while preparing programme plan?	

1.6 Finance

Year	Auc	lited		Certificate to NLMA
Tour	Yes	No	Yes	No
2014-15				
2015-16				
2016-17				

1.7	Doe	es JSS has	its own bu	ilding ?				:	Yes	/	No
1.8	Do	vou have	rural sub-c	entre ?				:	Yes	/	No
		f yes, how									- 10
		1 yes, nov	v illully .								
2.	1	Action	Taken (on Eval	luatior	ı Re	port				
2.1	Da	ite of eval	uation of J	SS by ext	ernal age	ency		:			
2.2	A	ction take	n on reco	mmendati	ions give	en by	evalua	ting a	gencies		
		Sr.No.		nendations		of	Action	ı take	n by JSS	S	
			Cyaracii	ig ageney							
3.	Vo	cation	al Train	ing							
3.1	Did	you cond	uct Need A	Assessmer	nt Survey	?	:	Yes	/ No		
]	f yes, me	ntion the y	ear							
3.2	Тур	es of cou	rses organi	zed:							
	1	As per ma	rket demai	nd (Give N	No) _						
	1	As per loc	al demand	(Give No	.) _						
3,3	No.	of vocati	onal train	ing centro	es functi	oning	5				
		Sr.No.	Urban	Rural	Tribal	At A	ECs				
								1			

4. Total no. of beneficiaries covered as per portal (category-wise)

4.1 Coverage of beneficiaries

															Beneficiaries																			
	Name	No. of		SC ST			OBC Min				Min	nority Tran			Trans	ransgender			Oth	ers														
Year	of the Course	Batches	R	Rura	1	U	Irba	n	R	Rura	1	U	rba	n	F	lura	1	U	rba	n	F	Rural Urban			Rural	Urban	F	Rura	1	U	rbar	1		
	Course		M	F	T	M	F	T	M	F	T	M	F	Т	M	F	T	M	F	T	M	F	T	M	F	T			M	F	T	M	F	T

	Resource Persons	Male	Female	Total	
	Local				
	Outstation				
5. A	Did you take feedback for the course?		:	Yes / No	
).1 A	Started own	Started enterprise	Joined as an	Joined as an	employee
	enterprise (self	jointly	employee in	In Govt.	Private
	employment)	Jonney	enterprise	firm/office	firm
5.2.b 5.3 A	fter completion of Sk	l it on your portal ?	: Yes	/ No	16
b	eneficiaries get?				
•	Boosted self-confider	nce			
•	Raised monthly incom	ne			
•	Improved social statu	S			
•	Started participation	in decision making			
•	Public acknowledgen	nent			
•	Received award (Giv	e details)		٦	

4.2 No. of Resource Persons engaged

	fter comp llowing g		development pi	rogrammes, h	ave you formed	any of the
10.	··· s	oups.			Give No.	
5.4.1	SHGs					
5.4.2	Co-op	eratives				
5.4.3	Credit	Co-operatives				
5.4.4	Mahil	a Mandals				
5.4.5	Yuvat	i Mandals				
5.4.6	Any ot	her (pl. specify	<u> </u>			
_ 1	. .		T GG 1 GD	-		
6 l	Role pe	erformed b	y JSS in SB	Programi	me	
6.1 Inv	olvement	of JSS in SB I	Programme			
6 1 1E	nliet Envi	ronmant Duildi	ing optivities/pro	arammas narf	ormad/aandusta	4
0.1.1E	IIIISt Elivi	Tollinent Bund	ing activities/pro	ogrammes perio	ormed/conducted	
6.1.2 N	No. of JSS	staff trained as	s Master Trainee	by SRC/SLM	A :	
				J		
6.1.3 I	Details of	Training Prog	gramme	T 1		D.
				Involven	nent in Training No. of	Programme
	Sr.No.	Name of JSS	staff (as MT)	Dates	Preraks trained	No. of VTs trained
6.2 Su	ıpervisioı	n and Monitor	ing of NIOS Te	est		
	Sr.No.	Year	No. of staff de	puted as Obser	rvers	

6.3 Did you compile the NIOS learners' data? : Yes / No If yes, did you submit it to ZLSS? : Yes / No

6.4 No. of vocational courses organized at AECs

			N	Vo. c	of Ac	lult l	Lear	ners	(SB)) cor	nple	ted t	he c	ourse	9	
Year	Name of the course		SC			ST		M	inori	ity	(OBC	•	C	ther	'S
		M	F	T	M	F	T	M	F	T	M	F	T	M	F	T

7. Field Level Activities/LEE

7.1 Enlist various LEE Programmes conducted

Sr.No.	Name of the Programme	Date	Venue	No. of people attended

Advocacy - Did you do advocacy for the following?	
1 Advocacy for enhancing SB Enrolment (Give details)	
2 Advocacy for attending adult education classes regularly (Give details)	
3 Advocacy for joining vocational courses (Give details)	
4 Advocacy for publicizing Govt. schemes (Give details)	

7.2.5 A	.dvo 	cacy for	forming	SHGs (Give deta	ails)		
7.2.6 A	.dvo	cacy for	availing	Govt. grants (Gi	ve details)		
7.2.7 A	.dvo	cacy for	availing	subsidies (Give	details)		
7.2.8 A	.dvo	cacy for	availing	bank loans (Give	e details)		
7.2.9 A	.dvo	cacy for	starting	new educational	programmes	s/courses (Give details))
7.2.10	Any	other, pl	. specify				
Org	anis	sation of S organ	f Exhibit			hibitions h as National, State, I	District etc. ?
5	, giv Sr. Vo.	e details Level	Dates	Name of the Exhibition	Type	of products exhibited	Sale amount
8.2 D:			bl: ::4	hofono overavi-i	na ISS and t	hition 9 Circ Jetaile	
8.2 Di	a yo	Sr.No.		de of publicity	Dates	Amount spent	

8.3 Did JSS participate in Exhibitions ? If yes, give details

G	NI C.1			Level				A .
Sr. No.	Name of the exhibition	National	Inter natio nal	District	Block	Local	Dates	Amount spent

8.4 Did you participate in 'Kriti' exhibition? If yes, give details

Sr.No.	Type of products exhibited	No. of beneficiaries	Sale amount
		participated	

9. Networking and Collaboration

9.1 Have you networked with the following organizations?

Sr.	Name of the agency	Type of	Year (2014-15, 2015-
No.	Name of the agency	networking	16 & 2016-17)
1	International Institutions		
2	National institutions		
3	I.T.		
4	DIET		
5	DRU		
6	Industry		
7	SHG		
8	Banks		
9	Govt. Depts.		
10	Any other		

9.2 Have you collaborated with any agency for organizing programme? : Yes / No If yes, give following details

9.2.1	Who are the co	ollaborators in	programme ma	magement?
J.4.I	vino are the c		programme me	magement.

Sr.	Collaborating	Type of		Year	
No.	Collaborating	Type of collaboration	2014-	2015-	2016-
140.	agency	Conadoration	15	16	17
1	SRC				
2	NLMA				
3	SLMA				
4	International NGOs				
5	National NGOs				
6	State NGOs				
7	Social Activists				
8	Industry				
9	CSR				
10	Any other				

10. Innovation/Special Initiatives/Awards

10.1

Mention special initiatives (if any) undertaken by JSS

10.2 Desig detai	gn and implementation of literacy programme for reaching the unreached. Give
10.2.1 Inn etc.	ovative mobilization strategies for special groups like blind, commercial sex workers
0.2.2 Inn	ovative strategies for enhancing quality of literacy programme
-	ategies used to gain public support for implementing SB programme

10.3 Innovations

10.3.1 Innovative skill development programme for non-literates (Give list)

Sr. No	Name of the innovative Skill development	No.	of persons	enrolled	No. of 1	persons com	pleted
110	programme	M	F	Total	M	F	Total
	Total						

10.3.2	Innovations in
•	Innovations in need assessment
•	Innovation in skill development courses
•	Innovations in training
•	Innovations in organising exhibitions, awareness programmes etc.
•	Innovations in LEE programmes
•	Innovations in monitoring and supervision strategies (pl.specify)
•	Innovation in supplementary teaching learning material (pl.specify)

No. Name of the award agency award stify your claim for the award?