

**National Backward Classes Finance & Development Corporation**  
(A Govt. of India Undertaking)  
Ministry of Social Justice & Empowerment

**Proforma for Submission of Skill Development Training proposal  
for the year \_\_\_\_\_**

Training in Trade(s) \_\_\_\_\_ For unemployed BC youth

1. Name and address of Organization/SCA : \_\_\_\_\_  
along with Contact No., Website, Email & \_\_\_\_\_  
Landline/Fax/Mobile \_\_\_\_\_
2. Type of Organization (Central Govt./State \_\_\_\_\_  
Govt./Govt. Approved/ any other) \_\_\_\_\_
3. Name and Designation of the Head of : \_\_\_\_\_  
Organization along with Contact No., \_\_\_\_\_  
Email & Landline/Fax/Mobile \_\_\_\_\_
4. Name & Designation of the Coordinator : \_\_\_\_\_  
along with Contact No., Email & \_\_\_\_\_  
Landline/Fax/Mobile \_\_\_\_\_
5. Background of the Organization
  - (A) Indicate the Past Experience in the : \_\_\_\_\_  
field of imparting Skill \_\_\_\_\_  
Development \_\_\_\_\_
  - (B) Infrastructure facilities and : \_\_\_\_\_  
expertise available to conduct \_\_\_\_\_  
SDTP effectively and efficiently \_\_\_\_\_
  - (C) List of faculty with Experience& \_\_\_\_\_  
Qualification (Please attached \_\_\_\_\_  
separate sheet) \_\_\_\_\_
  - (D) Have you obtained training grants : \_\_\_\_\_  
in previous year from NBCFDC or \_\_\_\_\_  
other Dept./Ministry. If yes please \_\_\_\_\_  
attach details of Grant-In-Aid \_\_\_\_\_  
received and utilized.

**6. Summary of physical targets and financial requirement**

Sl No	Trade	Location	Duration (Hrs./Month)	No. of Trainees	Average Cost per Trainee	Total Cost	No. of Jobs To be created		
							Wage Empl.	Self Empl.	Total
1	2	3	4	5	6	7	8	9	10
1									
2									
				<b>Total</b>					

7. Has job potential survey been carried out w.r.t. proposed training programme : \_\_\_\_\_

8. If any science and technology inputs contained in the proposed training programme : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

9. Expected Average income of trainees in case of Wage Employment after successful completion of training : \_\_\_\_\_

10. Name of the other organization(s) to be associated in the training for CSR Funding of the proposed training programme

Details of Organization

(a)

(b)

11. Mode of Identification of Trainees : \_\_\_\_\_

12. a) Details of post training : \_\_\_\_\_  
 Follow-up & Monitoring : \_\_\_\_\_  
 Programme to be under taken : \_\_\_\_\_  
 Alongwith loan tie-up/Industry for wage employment : \_\_\_\_\_

b) Mode of tracking of the trainees upto one year : \_\_\_\_\_

13. Whether prospective trainees list is enclosed if not then should be submitted alongwith demand of the 1st Installment. : \_\_\_\_\_

14. **Any other information** : \_\_\_\_\_  
(Separate Sheet may be attached)
15. **Whether SCA is willing to contribute** :  
**10% cost of the proposed training** Yes/No
16. **Whether utilization report in respect** :  
**of disbursement made during** Yes/No  
**previous years has been submitted, If**  
**so, Please attach copy of utilization**  
**certificate**
17. **Whether Audit of accounts is updated** :  
**for last three years (Enclose a copy)** Yes/No
18. **Assurance of atleast 70% placement** :  
**(Job/Self employment) after successful** Yes/No  
**completion of training**
19. **Previous track record of placement of** \_\_\_\_\_  
**successful trainees (job/self**  
**employment) (attach separate sheet)**

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

Place\_\_\_\_\_

(Authorized Signatory With Seal)