

## *Part B*

# *State wise Profile of Child Care Institutions*

*Andhra Pradesh*

<b>AP/01/GO/1</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>St. Children Home Manugar</b>	
Contact Details				
a) Name of Superintendent/Secretary			Smt. B. Saraswathi	
b) Address			Manugar, khamam Dist. A.P.	
c) Phone			-	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Girls)</b>	
Run by			State Government, ICDS (Women and Child Welfare Department)	
Year of Establishment of the Home			-	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			100	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	100	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	

a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home				Lodging & Boarding, Education with School Dress		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				Yes		
Any other registration				-		
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided				-		
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	4	20 * 20	-	-	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	10 * 15	-	-	
e)	Dinning Hall	1	20 * 20	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	1	10 * 10	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	1	10 * 10	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	2	-	-	-	
l)	Separate Latrines for boys and girls	6	-	-	-	
m)	Store room	1	10 * 10	-	-	
n)	Play Ground	-	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/

						Year)
a)	Superintendent/ Project Manager	1	1	B.A.	17,880	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	5 <sup>th</sup>	9,132	-
n)	House Aunty	1	1	-	8,076	-
o)	Security Guard	1	1	-	7,891	-
p)	Helper	1	1	10 <sup>th</sup>	8,913	-
q)	Sweeper	-	-	-	-	-
r)	Any other	-	-	-	-	-
	Total	5	5	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	<input type="checkbox"/>

#### Minimum Standard of Care

<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Monthly	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		As suggested by Doctor, Fruits, Milk, Bread.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	
b)	Winter Clothing(Jersey)	-	
c)	School Uniform		
d)	Under garments		
e)	Towel		
f)	Durry		
g)	Blanket		
h)	Pillow		
i)	Shoes/ Chappal		
j)	Tooth powder/paste		
k)	Soap		
l)	Oil		
m)	Utensils (Plate and Glass)		
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			
S.No	Formal School on Premises	Yes	No

a)	Pre-school		-	-			
b)	Primary		√	-			
c)	Secondary		√	-			
d)	Higher		-	-			
e)	Non-formal classes		-	-			
f)	Private coaching		-	-			
g)	Bridge Course		-	-			
h)	Any other		-	-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	100	Govt.	2 km	By Bus
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						-	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					-		
If Yes, details of qualification					-		
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					-		

Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	-	-
b)	Outdoor games	√	Daily
c)	Music	-	-
d)	Television	√	Daily
e)	Picnic	-	-
f)	Outings	-	-
g)	Cultural Programme	-	-
h)	Yoga	√	Daily
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		-	
What types of books provide for Children		6:00 p.m.	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	No	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		-	
What type of Co-operation and Co-ordination has been received for homes		-	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		-	
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-	



If Yes, when and by whom	-
Whether CWC members visit your institution regularly	-
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	-
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	-
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>AP/02/GO/2</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		<b>Children Home, SC-II</b>		
Contact Details				
a) Name of Superintendent/Secretary		Smt. I. Lakshmi Kumari		
b) Address		8-3-222, State Home Building, Ameerpet, Hyderabad		
c) Phone		9848952026		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home (Girls)</b>		
Run by		State Government		
Year of Establishment of the Home		-		
Supported by		State Government		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		60		
b) Present Strength		58		
Number of Children lodged in the home having families residing in the same State/UT		Nil		
Reasons for staying in the home in case of children having families (provide details)		-		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	30	-	30
c)	10-15 years	28	-	28
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	18	-	18
c)	6-12 month	7	-	7
d)	1-2 years	6	-	6
e)	2-3 years	2	-	2
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	25	-	25
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	

a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	1	-	1		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			Education, Games, Computer, Spoken English, Extra Curriculum Activities			
7Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			State Government Institution			
Any other registration			-			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	-				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	2	20 * 50	60	60	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	60	60	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	1	-	6	6	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	8	-	-	-	
l)	Separate Latrines for boys and girls	-	-	-	-	
m)	Store room	1	-	-	-	
n)	Play Ground	1	-	60	60	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorar	Associated with the

					-um per month	Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.Com.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other	1	1	-	-	-
	Total	6	6	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Orphans, Semi- orphans, Military Jawans Children's
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Caste, Income, Parent Death Certificate, Medical Report, Photographs
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	-
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	-

j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		10:00 a.m. to 8:00 p.m.	
Frequency of Doctor's visit		Once in a Month	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		No	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		Bread, Milk, Fruits.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	2	Year
d)	Under garments	2	Year
e)	Towel	2	Year
f)	Durry	1	Year
g)	Blanket	1	Year
h)	Pillow	1	Year
i)	Shoes/ Chappal	2	Year
j)	Tooth powder/paste	1	Month
k)	Soap	2	Month
l)	Oil	100 gm	Month
m)	Utensils (Plate and Glass)	1	Year
<b>EDUCATION</b>			

Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
S. No	Formal School on Premises				Yes	No	
a)	Pre-school				-	-	
b)	Primary				√	-	
c)	Secondary				√	-	
d)	Higher				√	-	
e)	Non-formal classes				-	-	
f)	Private coaching				-	-	
g)	Bridge Course				-	-	
h)	Any other → Tuitions				√	-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	10	-	10	-	1 km	By Walk
c)	Secondary	40	-	40	-	1 km	By Walk
d)	Higher	8	-	8	-	1 km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		

Whether instructors are trained		No	
If Yes, details of qualification		-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		No	
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	√	Daily
c)	Music	√	Weekly
d)	Television	√	Weekly
e)	Picnic	√	Yearly
f)	Outings	√	Yearly
g)	Cultural Programme	√	Weekly
h)	Yoga	√	Daily
i)	Debates	√	Monthly
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		Sunday	
What types of books provide for Children		Story Books, Class Books and General Knowledge.	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		-	

<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	By the department- Women and Child Development and Child Welfare
Whether CWC members visit your institution regularly	No
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-



<b>AP/03/GO/3</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Children Home, SC-I</b>	
Contact Details				
a) Name of Superintendent/Secretary			Smt. P. D. K. Harathi	
b) Address			3-2-116, Nimboliadda, Hyderabad, A.P.	
c) Phone			040-24605699	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Girls)</b>	
Run by			State Government	
Year of Establishment of the Home			1961	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			60	
b) Present Strength			52	
Number of Children lodged in the home having families residing in the same State/UT			Nil	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	26	-	26
c)	10-15 years	26	-	26
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	2	-	2
d)	1-2 years	20	-	20
e)	2-3 years	-	-	-
f)	3-4 years	5	-	5
g)	4-5 years	25	-	25
h)	More than 5 Years	52	-	52
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	

a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			Education, Extra Curriculum Activities			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			State Government Institution			
Any other registration			-			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	-				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	-				
b)	Rented	√				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	6	10 * 10	60	60	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	60	60	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	1	-	6	6	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	3	-	-	-	
l)	Separate Latrines for boys and girls	5	-	-	-	
m)	Store room	1	-	-	-	
n)	Play Ground	-	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				3337.4 Sq. Ft.		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/

						Year)
a)	Superintendent/ Project Manager	1	1	B.A.	33,455	2006
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other Night Watch Pen	1	1	-	-	-
	Total	6	6	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Caste, Income, Parent Death Certificate, Medical Report, Photographs
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	-
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	-
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	-

<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		10:00 a.m.	
Frequency of Doctor's visit		Once in a Month	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		Bread, Milk, Fruits and Chapati	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	2	Year
d)	Under garments	2	Year
e)	Towel	2	Year
f)	Durry	1	Year
g)	Blanket	-	Year
h)	Pillow	1	Year
i)	Shoes/ Chappal	2	Year
j)	Tooth powder/paste	1	Month
k)	Soap	2	Month
l)	Oil	100 gm	Month
m)	Utensils (Plate and Glass)	1	Year
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			

S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other → Tuitions	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	26	-	26	Govt.	1 km	By Walk
c)	Secondary	26	-	26	Govt.	1 km	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students

No

If Yes, then how much per child month

-

Whether the educational facilities are adequate for children

Yes

If No, what are the other facilities required

-

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children

-

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-

Whether instructors are trained

No

If Yes, details of qualification

-

Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		No	
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	√	Daily
c)	Music	√	Weekly
d)	Television	√	Weekly
e)	Picnic	√	Yearly
f)	Outings	√	Yearly
g)	Cultural Programme	√	Weekly
h)	Yoga	√	Daily
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		Sunday	
What types of books provide for Children		Story Books, Class Books and General Knowledge.	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		-	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		-	

Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	By the department- Women and Child Development and Child Welfare
Whether CWC members visit your institution regularly	No
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	-
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>AP/04/GO/4</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Children Home (SC)</b>	
Contact Details				
a) Name of Superintendent/Secretary			A. Jayalakshmi	
b) Address			Children Home (SC), Vijayawada-2	
c) Phone			9849192637	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Girls)</b>	
Run by			State Government (Women and Child Welfare Department)	
Year of Establishment of the Home			1987	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			-	
b) Present Strength			60	
Number of Children lodged in the home having families residing in the same State/UT			60	
Reasons for staying in the home in case of children having families (provide details)			Economically backward children.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	60	-	60
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	60	-	60



Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home				Providing Food, Bed, Uniform, Shelter, Learning Education and Discipline to the Children.	
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				Yes	
Any other registration				-	
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided				-	
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	2	2
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	-	-	-
l)	Separate Latrines for boys and girls	4	-	-	-
m)	Store room	2	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M. A.	32,000	15-08-2008
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	9 <sup>th</sup>	20,000	-
q)	Sweeper	-	-	-	-	-
r)	Any other Attender	1	-	-	-	-
	Total	3	2	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Orphan, Semi Orphan and Economically Backward.	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					Orphan, Semi Orphan, Economically Background, Date of Birth, City, Father Name, Mother Name about Studies.	
Maintenance of Registers/Record Maintenance						
S.No.	Details of Register				Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register				<input checked="" type="checkbox"/>	
b)	Individual Care Plan				<input checked="" type="checkbox"/>	
c)	Supervision register				<input checked="" type="checkbox"/>	
d)	Medical file or medical report				<input checked="" type="checkbox"/>	

e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Health Check Up	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		Milk and Bread.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Year
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	1	2 Year
d)	Under garments	1	-
e)	Towel	1	2 Year
f)	Durry	-	-
g)	Blanket	1	2 Year
h)	Pillow	1	Year
i)	Shoes/ Chappal	1	Year

j)	Tooth powder/paste	1	Year
k)	Soap	1	3 Year
l)	Oil	1	Year
m)	Utensils (Plate and Glass)	1	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	20	-	20	Private	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	36	-	36	Govt.	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children No

If No, what are the other facilities required Own Building

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-

l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	-		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	√		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Saturday, 6:00	
What types of books provide for Children				Story Books, General Knowledge books etc.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			-	
i)	Clean and fly-proof kitchen			-	
<b>CO-ORDINATION AND COLLABORATION</b>					

Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What type of Co-operation and Co-ordination has been received for homes	Care and Share
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	-
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Care and Share for Education purpose.
Suggestion of CWC/Inspection Committee	★ Joining the Children in the home
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>AP/05 /GO/5</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		<b>Children Home, Alwal, Rangareddy District.</b>		
Contact Details				
a) Name of Superintendent/Secretary		Smt. D. Sarada (FAC)		
b) Address		1-5-103, Old Alwal		
c) Phone		27974136		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home (Girls)</b>		
Run by		State Government		
Year of Establishment of the Home		1970		
Supported by		State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		60		
b) Present Strength		47		
Number of Children lodged in the home having families residing in the same State/UT		-		
Reasons for staying in the home in case of children having families (provide details)		-		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	19	-	19
c)	10-15 years	28	-	28
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	8	-	8
d)	1-2 years	10	-	10
e)	2-3 years	7	-	7
f)	3-4 years	6	-	6
g)	4-5 years	5	-	5
h)	More than 5 Years	11	-	11
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	1	-	1	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Accommodation, Food, Games (Indoor and outdoor), Cultural Programmes.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			Nil		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	60	2 ½ * 5	60	47
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	12 * 12	1	-
e)	Dinning Hall	1	12 * 12	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	1	12 * 10	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	5	6 * 3 ½	-	-
l)	Separate Latrines for boys and girls	5	6 * 3 ½	-	-
m)	Store room	1	10 * 10	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				1000	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					



S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	FAC	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	8 <sup>th</sup>	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other-Watchmen	1	-	-	-	-
	Total	5	4	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Orphans, Semi- Orphans, Military Jawan.
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Parents death certificates, photos, Identity Care Certificate, Caste Certificate, Medical Reports
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	-
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>

g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	-	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Yes	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Tuesday	
Frequency of Doctor's visit		Once in a Month	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		Milk, Fruits and Bread.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	1	Yearly
f)	Durry	1	Yearly
g)	Blanket	2	Yearly
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	1	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly

l)	Oil	100 gm	Monthly				
m)	Utensils (Plate and Glass)	1+1	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	√	-				
c)	Secondary	√	-				
d)	Higher	√	-				
e)	Non-formal classes	-	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	22	-	22	Govt.	½ km	By Walk
c)	Secondary	12	-	12	Govt.	½ km	By Walk
d)	Higher	13	-	13	Govt.	½ km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		

n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Weekly	
e)	Picnic	√		Monthly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Daily	
i)	Debates	√		Monthly	
j)	Radio	-		-	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Daily, Full time	
What types of books provide for Children				Story Books, General Knowledge, Leaders, All in one, Dictionary.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				Yes	

What type of Co-operation and Co-ordination has been received for homes	State Govt.
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	By the department
Whether CWC members visit your institution regularly	No
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Women Development and Child Welfare Department.
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>AP/06 /GO/6</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Children Home, SPSR Nellore District</b>	
Contact Details				
a) Name of Superintendent/Secretary			G. Vijayalakshamma	
b) Address			Children Home, Venkatagiri, Nellore District	
c) Phone			9885246298	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Girls)</b>	
Run by			State Government (Women and Child Development Department)	
Year of Establishment of the Home			1981	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			60	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Orphans, Semi-Orphans, E.B.C.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	9	-	9
c)	10-15 years	51	-	51
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	19	-	19
h)	More than 5 Years	41	-	41
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys			
a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No			
Any other registration			-			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	-				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	-	-	-	-	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	1	20`*11`10``	10	10	
d)	Kitchen	1	17`9``*8`	-	-	
e)	Dinning Hall	1	30`*11`10`	60	60	
f)	Recreation room	1	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	1	30`*11`10`	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	4	17`9``*8`	-	-	
l)	Separate Latrines for boys and girls	4	17`9``*6`	-	-	
m)	Store room	1	11`10``*7`	-	-	
n)	Play Ground	-	138`*78`	-	-	
o)	Vocational Training Centre	1	11`10``*8`10``	-	-	
Total area of the Campus (Sq. ft.)				29,797		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorar-	Associated with the

					um per month	Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	0	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other	-	-	-	-	-
	Total	4	3	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Query Report, Medical Certificate and Cast Certificate
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Orphan, Semi Orphans and E.B.C.
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	-
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>



k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Medical Services	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Tuesday	
Frequency of Doctor's visit		Quarterly Visit	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	2	Yearly
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	-	-
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	100 gm	Monthly
m)	Utensils (Plate and Glass)	1+1	Yearly
<b>EDUCATION</b>			
Whether educational facilities are available for children			Yes

Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes		No			
a)	Pre-school	-		-			
b)	Primary	√		-			
c)	Secondary	√		-			
d)	Higher	-		-			
e)	Non-formal classes	-		-			
f)	Private coaching	-		-			
g)	Bridge Course	-		-			
h)	Any other	-		-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	9	-	9	Govt.	½ km	By Walk
c)	Secondary	51	-	51	Govt.	½ km	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
VOCATIONAL TRAINING							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained						-	
If Yes, details of qualification						-	

Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		-	
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Per Week
b)	Outdoor games	√	Per Week
c)	Music	-	-
d)	Television	√	Per Week
e)	Picnic	√	Yearly
f)	Outings	√	Holidays
g)	Cultural Programme	√	Yearly
h)	Yoga	√	Daily
i)	Debates	√	Yearly
j)	Radio	-	-
k)	Any Other:	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		Weekly	
What types of books provide for Children		Story Books, General Knowledge, Historical and Mythology.	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	No	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		-	
What type of Co-operation and Co-ordination has been received for homes		-	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		-	

Whether any specific evaluation of the Organization/Institution has been conducted in the past	-
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	-
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	-
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	-
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	★ Orientation Training on Child Rights And Protection Programmes attended to Superintendent Children Home Venkatagiri

<b>AP/07 /GO/7</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Children Home Piduguralla</b>	
Contact Details				
a) Name of Superintendent/Secretary			P.Phani Kumari	
b) Address			FAC	
c) Phone			9390911133	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Girls)</b>	
Run by			State Government (Women and Child Development Department)	
Year of Establishment of the Home			1980	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			60	
b) Present Strength			56	
Number of Children lodged in the home having families residing in the same State/UT			56	
Reasons for staying in the home in case of children having families (provide details)			Orphans, Semi-Orphans, E.B.C.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	1	-	1
b)	5-10 years	24	-	24
c)	10-15 years	30	-	30
d)	15-18 years	1	-	1
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	5	-	5
c)	6-12 month	3	-	3
d)	1-2 years	6	-	6
e)	2-3 years	8	-	8
f)	3-4 years	10	-	10
g)	4-5 years	21	-	21
h)	More than 5 Years	3	-	3

Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
e)	Mentally challenged	-	-	-	
f)	Autism	-	-	-	
g)	Physically challenged	-	-	-	
h)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	4320	60	56
b)	Classrooms	1	4320	60	56
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	180	-	-
e)	Dinning Hall	1	4320	60	56
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	1	252	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	6	144	-	-
l)	Separate Latrines for boys and girls	6	144	-	-
m)	Store room	1	180	-	-
n)	Play Ground	1	4500	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				6 Hectors	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	-	-	-	-
q)	Sweeper	1	-	-	-	-
r)	Any other	1	-	-	-	-
	Total	6	-	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes	
If Yes Please mention	Orphans, Semi Orphans and E.B.C.	
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes	
If Yes, what kind of information you have collected from children	Caste, Income, Resident Physical fitness and Death Certificate	
<b>Maintenance of Registers/Record Maintenance</b>		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input type="checkbox"/>
c)	Supervision register	<input type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>

i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Yes	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	-	
c)	Any other	√	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for such children		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		Nil	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		Bread, Milk and Butter Milk etc	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		-	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	1	Yearly
d)	Under garments	-	-
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	2	Yearly
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	-	-
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	100 gm	Monthly
m)	Utensils (Plate and Glass)	1 Set	Yearly



<b>EDUCATION</b>							
Whether educational facilities are available for children						Yes	
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises				Yes	No	
a)	Pre-school				√	-	
b)	Primary				√	-	
c)	Secondary				√	-	
d)	Higher				-	-	
e)	Non-formal classes				-	-	
f)	Private coaching				-	-	
g)	Bridge Course				-	-	
h)	Any other				-	-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	1	-	1	Govt.	50 Yards	By Walk
b)	Primary	24	-	24	Govt.	50 Yards	By Walk
c)	Secondary	31	-	31	Govt.	½ km	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						Tutors and Computer Teachers	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		

o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	-		-	
c)	Music	-		-	
d)	Television	-		-	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	√		Weekly	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Holidays	
What types of books provide for Children				General Knowledge and Historical Stories	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				-	
What type of Co-operation and Co-ordination has been received for				-	

homes	
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	No
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	-
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Care Givers Training
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>AP/08 /GO/8</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Children Home Srikakulam</b>	
Contact Details				
a) Name of Superintendent/Secretary			E. Vijaya Kumari	
b) Address			Arasaviki Segidihedlin	
c) Phone			9848113835	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Girls)</b>	
Run by			State Government	
Year of Establishment of the Home			-	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			60	
b) Present Strength			53	
Number of Children lodged in the home having families residing in the same State/UT			53	
Reasons for staying in the home in case of children having families (provide details)			Orphans, Semi Orphans, Economically Backward Class	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	20	-	20
c)	10-15 years	33	-	33
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-

b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes			
Any other registration			No			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided			Free Boarding, Education and Lodging etc.			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	1	-	60	53	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	1	-	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	4	-	-	-	
l)	Separate Latrines for boys and girls	4	-	-	-	
m)	Store room	1	-	-	-	
n)	Play Ground	1	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/

						Year)
a)	Superintendent/ Project Manager	1	1	B.A. B.Ed.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	M.A.	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	10 <sup>th</sup>	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	10 <sup>th</sup>	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other: Watchmen	1	1	7 <sup>th</sup>	-	-
	Attender	1	1	5 <sup>th</sup>	-	-
	Total	6	6	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		-
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify) → Moment Register	<input checked="" type="checkbox"/>

<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Government Doctor visit the Home.	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Monthly in the first week	
Frequency of Doctor's visit		Yes	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		NoTwo	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		Bread and Milk etc.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Month
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	-	-
e)	Towel	1	-
f)	Durry	1	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/ Chappal	-	-
j)	Tooth powder/paste	-	-
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			

S.No	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	√	-				
c)	Secondary	-	-				
d)	Higher	√	-				
e)	Non-formal classes	-	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	20	-	20	Govt.	¼ m	Walk
c)	Secondary	-	-	-	-	-	-
d)	Higher	33	-	33	Govt.	¼ m	Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					Yes		
If Yes, details of qualification					M.A. B.Ed.		
Whether networking with any Institute/NGO/placement Agency for					No		



placement of children after completion of Course			
Difficulty (if any)		After completing of Course the passing girls admitted in cottage home, vizianagaran	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	√	Daily
c)	Music	-	-
d)	Television	√	-
e)	Picnic	-	-
f)	Outings	-	-
g)	Cultural Programme	-	-
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other: Computer	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		Daily Evening	
What types of books provide for Children		General Knowledge, Naval etc	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		-	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		-	

Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	N.A.
b) Details of Training Programmes	N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	N.A.
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	Women and Child Welfare Department
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>AP/01/ NGO/9</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Bethel Pentecostal Ministry	
Address for Communication	541, Durai Nagar Extension Tirupathur Vellore Dist.- 635601	
Telephone (with STD code)	04179-221263, 9443272550	
Fax	-	
Email ID	pasterbkumar@yahoo.co.in	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Pastor.B.Kumar 541, Durai Nagar, Vellore Dist- 635601	
Vision of NGO	Development of poor children	
Mission of NGO	Destitute, Health Work, Old Age Home	
Key Objectives	Orphanage	
Major Activities	Orphanage and Education	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	06-06-1996	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Trust Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
22-01-1993	Doc. 22/1993	Palayankottai
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	075980299	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	3	
Physical Assets of the Organization	Own Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	5	
Total No. of Professional Staff		
a) Male	1	
b) Female	4	
Total number of		
a) Full Time	5	
b) Part time Staff	0	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
420346		405419		319476	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Reports, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				-	
Contact Details					
a) Name of Superintendent/Secretary				-	
b) Address				-	
c) Phone				-	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				-	
Run by				-	
Year of Establishment of the Home				-	
Supported by				-	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				-	
Number of inmates					
a) Capacity				-	
b) Present Strength				-	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	

e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by			-		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)	-
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	-

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes	-
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	-
If Yes, what kind of information you have collected from children	-

**Maintenance of Registers/Record Maintenance**

S. No.	Details of Register	Yes/No
l)	Admission and discharge register	-
m)	Individual Care Plan	-
n)	Supervision register	-

o)	Medical file or medical report	-	
p)	Nutrition diet file	-	
q)	Stock Register	-	
r)	Visitor's book	-	
s)	Case file	-	
t)	Inquiry report file	-	
u)	Stock register	-	
v)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		-	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		--	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		-	
How many times meals are provided in a day		-	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		-	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		-	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Blanket	-	-
h)	Pillow	-	-

i)	Shoes/Chappal	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students

-

If Yes, then how much per child month

-

Whether the educational facilities are adequate for children

-

If No, what are the other facilities required

-

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-



k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	-	-	-	-
b)	Outdoor games	-	-	-	-
c)	Music	-	-	-	-
d)	Television	-	-	-	-
e)	Picnic	-	-	-	-
f)	Outings	-	-	-	-
g)	Cultural Programme	-	-	-	-
h)	Yoga	-	-	-	-
i)	Debates	-	-	-	-
j)	Radio	-	-	-	-
k)	Any Other	-	-	-	-
<b>LIBRARY</b>					
Whether library facilities are available or not				-	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			-	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			-	
h)	Sufficient space for washing			-	
i)	Clean and fly-proof kitchen			-	
<b>CO-ORDINATION AND COLLABORATION</b>					

Whether the Organization/Institution is Networking with other Govt., NGOs etc	-
What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	-
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	-
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	-
If Yes,	-
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	-
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

*Chhattisgarh*

<b>CG/01/ NGO/10</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Missionaries of Charity	
Address for Communication	"Shanti Bhavan", Rajendra Nagar, Raipur- 492006	
Telephone (with STD code)	0771-2424115	
Fax	Nil	
Email ID	Nil	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sister Superior, M.O.C., Rajendra Nagar, Raipur-492006	
Vision of NGO	To give whole-hearted and free service to the poorest of the poor, irrespective of caste, creed race, nationality and culture	
Mission of NGO	Do	
Key Objectives	Do	
Major Activities	<ul style="list-style-type: none"> <li>➔ Nursing the sick and the dying destitute (Women)</li> <li>➔ Caring for the orphan, abandoned and the mentally and physically handicapped children, and giving them in country adoption</li> <li>➔ Free distribution of food, Clothing and medicine, for the poorest of the poor</li> <li>➔ Visiting the families</li> </ul>	
Target group/ Stakeholders	Women and Children	
Geographical location/area	Urban and Rural Area	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	31 <sup>st</sup> May, 1981	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Under Societies Registration Act, XXI 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
16 <sup>th</sup> March 1959	S/3509	Calcutta
Whether the organization is registered under FCRA	Our head-office is registered. This is a branch house	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	Home is registered under State Government	
Whether your Child Care Institutions/Organizations are registered	Yes	

with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006					
Number of Governing Body Members		-			
Physical Assets of the Organization		Own building and furniture			
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization		24			
Total No. of Professional Staff					
a) Male		1			
b) Female		3			
Total number of					
a) Full Time		22			
b) Part time Staff		2			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10	2008-09	2007-08			
-	-	-			
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level		-			
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		No			
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>		“Shanti Bhavan”			
Contact Details					
a) Name of Superintendent/Secretary		Sister Superior			
b) Address		M.O.C. Rajendra Nagar, Raipur-492006			
c) Phone		0771-2424115			
d) Fax		Nil			
e) Email		Nil			
<b>Type of Institution</b>		<b>Children Home</b>			
Run by		NGO			
Year of Establishment of the Home		31 <sup>st</sup> May, 1981			
Supported by		Local Donations in cash and Kind and fund from Head-Office			
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>			
Number of inmates					
a) Capacity		40			
b) Present Strength		38			
Number of Children lodged in the home having families residing in the same State/UT		N.A.			
Reasons for staying in the home in case of children having families		N.A.			

(provide details)				
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	21	11	32
b)	5-10 years	1	5	6
c)	10-15 years	-	-	-
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	4	3	7
b)	4-6 month	2	1	3
c)	6-12 month	3	3	6
d)	1-2 years	1	3	4
e)	2-3 years	7	1	8
f)	3-4 years	0	1	1
g)	4-5 years	3	0	3
h)	More than 5 Years	5	1	6
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	8	1	9
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-
What are the facilities and support services provided for the children staying in Home			Two children we take to the physiotherapy centre and have the therapy by the doctors and physiotherapist	
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No	
Any other registration			Our home is registered under the State Government and have the license to conduct in- country adoptions	
Whether the Institution is certified as Fit Institution by				
a)	Juvenile Justice Board	√		
b)	Child Welfare Committee	-		
If Yes, Please Specify the Facilities provided			Food, Clothing, Sleeping arrangements, Medical Facilities, Educational Facilities, Recreational Facilities etc.	
<b>INFRASTRUCTURE</b>				
Infrastructure available				
a)	Owned	√		
b)	Rented	-		
c)	Lease	-		

d)	Donated					-
<b>Details of Accommodation for Children and Institutional Infrastructure</b>						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	2	849.4	40	38	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	1	199	6	0	
d)	Kitchen	1	160.6	50	38	
e)	Dinning Hall	1	172	30	12	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counseling & Guidance room	-	-	-	-	
i)	Office rooms	1	190.6	6	4	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	1	163	20	15	
l)	Separate Latrines for boys and girls	-	-	-	-	
m)	Store room	1	234	50	50	
n)	Play Ground	1	621	20	15	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				5 Acres		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	10 <sup>th</sup> & Medical	Nil	06-06-2009
b)	Social Welfare Officer	1	1	M.S.W.	6,500/-	01-01-2010
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	Paed. MD.	Nil	-
f)	Paramedical Staff	1	1	12 <sup>th</sup> & Medical	Nil	11-01-2010
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	Metric & Medical	Nil	11-01-2010
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	12 <sup>th</sup>	5,070/-	01-01-1993

m)	Cook	1	1	5 <sup>th</sup>	3,600/-	10-09-2009
n)	House Aunty	-	-	-	-	-
o)	Security Guard	1	1	4 <sup>th</sup>	3,500/-	01-10-2001
p)	Helper	1	1	12 <sup>th</sup>	4,000/-	01-10-2002
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)					
	Care Taker	13	13	8 <sup>th</sup>	3145	01-12-2004
	Gardener	1	1	Nil	3,500	01-11-2010
	Tailor	1	1	10 <sup>th</sup>	2,000	01-09-2008
	Total	24	24	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	CARA Guidelines 2004
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Every Child has a file with official documents and Medical Papers

### Maintenance of Registers/Record Maintenance

S.No.	Details of Register	Please Tick
a)	Admission and discharge register	√
b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify) Related adoption register as per CARA	√

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Visiting Doctor, Para-medical Staff, tie-up with pediatric hospitals
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	N.A.
Frequency of Doctor's visit	Every two weeks and as & when necessary
Whether any trained Staff for first-aid	Yes

#### Referral of Cases

a)	Govt. Hospital	-
b)	Dispensary	√
c)	Any other- Private Hospitals	√
How many children are suffering from communicable diseases		Nil



and HIV/AIDS							
Any specialized services are provided for them		No					
If yes, Please provide in details		N.A.					
Whether ambulance facility is available for patients		Yes					
Any other Facilities		Immunization Facility					
<b>NUTRITION AND DIET SCALE</b>							
Whether any menu chart followed by homes		Yes					
How many times meals are provided in a day		For babies milk is given every two hours and for toddlers 7 times					
What types of special diet is provided for sick infant or children		According to the advice of the Pediatrician					
How many cooks are there		One					
Whether children are helping at the time of cooking in any way		No					
Whether any Nutrition and Child Development Officer is there		No					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number	Frequency (Month/Year)				
a)	Summer Clothing	6	Yearly				
b)	Winter Clothing(Jersey)	8	Yearly				
c)	School Uniform	2	Yearly				
d)	Under garments	-	-				
e)	Towel	1	Yearly				
f)	Durry	-	-				
g)	Blanket	1	Yearly				
h)	Pillow	1	Yearly				
i)	Shoes/Chappal	2	Yearly				
j)	Tooth powder/paste	1	Monthly				
k)	Soap	1	Monthly				
l)	Oil	1	Monthly				
m)	Utensils (Plate and Glass)	1	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		No					
Are any of the educational facilities available within the institution							
	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	-	-				
c)	Secondary	-	-				
d)	Higher	-	-				
e)	Non-formal classes	-	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	2	1	1	Private	1 km	Institutional

							Vehicle
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students							No
If Yes, then how much per child month							N.A.
Whether the educational facilities are adequate for children							Yes
If No, what are the other facilities required							N.A.
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children							N.A.
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					N.A.		
If Yes, details of qualification					N.A.		
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					N.A.		
Difficulty (if any)					N.A.		
<b>RECREATIONAL FACILITIES</b>							
Whether recreational facilities are available					Yes		
If yes, what are the recreation facilities available for children in Institution							
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly			
a)	Indoor games	√		Daily			
b)	Outdoor games	√		Daily			
c)	Music	√		Daily			
d)	Television	√		Monthly			
e)	Picnic	-		-			

f)	Outings	√	Quarterly
g)	Cultural Programme	√	Yearly
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	√	Daily
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		N.A.	
If Yes, Opening timing or day		N.A.	
What types of books provide for Children		N.A.	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What types of Co-operation and Co-ordination received for homes		Inspections, Receive Permission	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		N.A.	
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No	
If Yes, when and by whom		-	
Whether CWC members visit your institution regularly		Yes	
<b>TRAINING NEEDS</b>			
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No	
If Yes,			
a)	Number of Training Programmes organized	-	
b)	Details of Training Programmes	-	
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes	
If Yes, Please specify		★ CARA for adoption	

	<ul style="list-style-type: none"> <li>★ CWC regarding adoption</li> <li>★ Child Right Workshop</li> <li>★ ICPS Workshop</li> </ul>
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ CWC and women & child welfare office
Suggestion of CWC/Inspection Committee	★ They are happy and co-operative with us always
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	★ Yes any programme/ workshop concerned adoption

<b>CG/02/ NGO/11</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	SOS Children's Village, Raipur	
Address for Communication	Mana Camp, Raipur	
Telephone (with STD code)	0771-2418372	
Fax	-	
Email ID	<a href="mailto:soscvraipur@yahoo.co.in">soscvraipur@yahoo.co.in</a>	
Website of Organization	<a href="http://www.soscvindia.org">www.soscvindia.org</a>	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	National Director 011-43239200	
Vision of NGO	Each Child grows up in a family with love, respect and security	
Mission of NGO	We build families for children in need	
Key Objectives	Mothers, Community etc.	
Major Activities	We are committed to cause of Children	
Target group/ Stakeholders	Children	
Geographical location/area	Mana Camp, Raipur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	12-03-1964, Delhi	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Under Societies Registration Act, XXI 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
12-03-1964	S/2429	New Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	State Government	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	16	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	43	
Total No. of Professional Staff		
a) Male	13	
b) Female	28	
Total number of		
a) Full Time	30	
b) Part time Staff	13	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		
2009-10	2008-09	2007-08

120.00		90.00		90.00	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify) Corporate
-	√	√	√	√	√
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure, Leaflet, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				SOS Children's Village, Raipur	
Contact Details					
a) Name of Superintendent/Secretary					
b) Address				Mana Camp, Raipur	
c) Phone				0771-2418372	
d) Fax				-	
e) Email				soscvrampur@yahoo.co.in	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO	
Year of Establishment of the Home				2005	
Supported by				MWCD and State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				140	
b) Present Strength				148	
Number of Children lodged in the home having families residing in the same State/UT				148	
Reasons for staying in the home in case of children having families (provide details)				Orphan Children	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	3	3	6	
b)	5-10 years	37	41	78	
c)	10-15 years	33	28	61	
d)	15-18 years	0	3	3	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	4	3	7	
b)	4-6 month	0	2	2	
c)	6-12 month	1	3	4	
d)	1-2 years	4	7	11	
e)	2-3 years	30	16	46	

f)	3-4 years	22	24	46	
g)	4-5 years	14	18	32	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			JJ Act		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S.No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	4 * 14	182 * 14	-	-
b)	Classrooms	3 * 2	225 * 2	-	-
c)	Sick room/ First Aid Room	4 * 1	400	-	-
d)	Kitchen	1 * 14	180 * 14	-	-
e)	Dinning Hall	1 * 14	252 * 14	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-
h)	Counseling & Guidance room	3	360	-	-
i)	Office rooms	3	360	-	-
j)	Workshops	3	400	-	-
k)	Separate Bathrooms for boys and girls	1 * 14	20 * 14	-	-
l)	Separate Latrines for boys and girls	2 * 14	40 * 14	-	-
m)	Store room	1	-	-	-
n)	Play Ground	1	3 Acre	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				25940	

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A.	-	-
b)	Social Welfare Officer	1	1	M.A.	-	-
c)	Counselor	2	2	M.A.	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.A	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	2	2	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	-	-	-
j)	Music Teacher	1	1	-	-	-
k)	Sports/ Yoga Teacher	1	1	-	-	-
l)	Driver	1	1	-	-	-
m)	Cook	14	14	-	-	-
n)	House Aunty	5	5	-	-	-
o)	Security Guard	4	4	-	-	-
p)	Helper	5	5	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
Total		24	24	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Double Orphan Children	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					Social Investigation	
<b>Maintenance of Registers/Record Maintenance</b>						
S.No.	Details of Register				Please Tick	
a)	Admission and discharge register				√	
b)	Individual Care Plan				√	
c)	Supervision register				√	
d)	Medical file or medical report				√	
e)	Nutrition diet file				√	



f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Medical Top Priority	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		8a.m.	
Frequency of Doctor's visit		Twice in a week	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	√	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		N.A.	
If yes, Please provide in details		N.A.	
Whether ambulance facility is available for patients		N.A.	
Any other Facilities		N.A.	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		According to the advice of the Pediatrician	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	3	Yearly
e)	Towel	1	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	1	Yearly
j)	Tooth powder/paste	1	Monthly

k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	-	√
c)	Secondary	-	√
d)	Higher	-	√
e)	Non-formal classes	√	-
f)	Private coaching	√	-
g)	Bridge Course	√	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	16	-	-	-	-	-
b)	Primary	89	-	-	-	-	-
c)	Secondary	37	-	-	-	-	-
d)	Higher	5	-	-	-	-	-
e)	Non-formal classes	1	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month Need based

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children N.A.

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-

m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				N.A.	
If Yes, details of qualification				N.A.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				N.A.	
Difficulty (if any)				N.A.	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	√		-	
j)	Radio	√		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Daily, 8:00 a.m.	
What types of books provide for Children				Educational	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				Yes	

What types of Co-operation and Co-ordination received for homes	Meeting
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	Yes
If Yes,	
a) Number of Training Programmes organized	10
b) Details of Training Programmes	JJ Act, Child Rights, Health, Education, Career and Care.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	★ WCD Programmes
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ WCD ★ Social Welfare ★ CWC ★ NGO
Suggestion of CWC/Inspection Committee	★ More bridge course for children
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	★ JJ Act ★ Nutrition ★ Record Keeping ★ Care of children in Institutional Settings

*Delhi*

<b>DELHI/01/ GO/12</b>				
<b>Name of Child Care Institution</b>			Children Home for Girls	
Contact Details				
a) Name of Superintendent/Secretary			Ms. Inderpreet	
b) Address			Children Home for Girls, Nirmal Chhaya Complex.	
c) Phone			011-2850599	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			Observation Home	
Run by			State Government	
Year of Establishment of the Home			1 <sup>st</sup> January, 1981	
Supported by			MWCD and State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			1	
Number of Children lodged in the home having families residing in the same State/UT			No	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	1	-	1
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home	-
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960	No
Any other registration	Juvenile Delinquency (Child Care and Protection) Act, 2000
Whether the Institution is certified as Fit Institution by	
a) Juvenile Justice Board	√
b) Child Welfare Committee	√
If Yes, Please Specify the Facilities provided	All facilities which covers JJ Act

### **INFRASTRUCTURE**

Infrastructure available	
a) Owned	√
b) Rented	-
c) Lease	-
d) Donated	-

Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	-	100	1
b)	Classrooms	3		100	1
c)	Sick room/ First Aid Room	1		100	1
d)	Kitchen	1		-	1
e)	Dinning Hall	1		-	1
f)	Recreation room	1		-	1
g)	Library	1		-	1
h)	Counseling & Guidance room	1		-	1
i)	Office rooms	1		-	1
j)	Workshops	1		-	1
k)	Separate Bathrooms for boys and girls	√		-	1
l)	Separate Latrines for boys and girls	√		-	1
m)	Store room	1		-	1
n)	Play Ground	1		-	1
o)	Vocational Training Centre	1		-	1

Total area of the Campus (Sq. ft.)	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	Yes

### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/ Year)
-------	------------------	---------------------	-----------------	---------------------------	-------------------------------	---

a)	Superintendent/ Project Manager	1				
b)	Social Welfare Officer	1				
c)	Counselor	-				
d)	Case Worker	-				
e)	Doctor (Part time or Full time)	-				
f)	Paramedical Staff	-				
g)	Educator	-				
h)	Vocational Instructor	-				
i)	Store-keeper cum Accountant	-				
j)	Music Teacher	-				
k)	Sports/ Yoga Teacher	-				
l)	Driver	-				
m)	Cook	1				
n)	House Aunty	-				
o)	Security Guard	25				
p)	Helper	-				
q)	Sweeper	-				
r)	Any other (Please Specify)	Care Taker 3				
	Total					

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Through JJ Board and PS
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		-
<b>Maintenance of Registers/Record Maintenance</b>		
S.No.	Details of Register	Please Specify
a)	Admission and discharge register	Yes
b)	Individual Care Plan	Yes
c)	Supervision register	Yes
d)	Medical file or medical report	Yes
e)	Nutrition diet file	Yes
f)	Stock Register	Yes
g)	Visitor's book	Yes
h)	Case file	Yes
i)	Inquiry report file	Yes
j)	Stock register	Yes
k)	Any other(Please Specify)	Yes



<b>Minimum Standard of Care</b>			
<b><u>MEDICAL CARE</u></b>			
What are the health related services available for Children		MCU and Medical Unit in institution	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		9:00 a.m. to 3:00 p.m., Monday to Saturday	
Frequency of Doctor's visit		Monday to Saturday	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		Medical unit in home or institution	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		Egg, Butter, Extra Milk and Fruits	
How many cooks are there		Three	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	5	Per Year
b)	Winter Clothing(Jersey)	2 Half + Full	Per Year
c)	School Uniform	2 Set	Per Year
d)	Under garments	6	-
e)	Towel	3	-
f)	Durry	1	Within 3 Year
g)	Blanket	1	Per Year
h)	Pillow	1	Per Year
i)	Shoes/Chappal	2/2	Per Year
j)	Tooth powder/paste	50 Cirum	Per Month
k)	Soap	1Piece, 500 g for cloth Washing + 100 g Powder	Per Month
l)	Oil	100 Gram	Per Month
m)	Utensils (Plate and Glass)	1 Plate, 2 bowl, 1	-

		Glass, 1 Spoon					
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
a)	Formal School on Premises	Yes	No				
b)	Pre-school	-	-				
c)	Primary	-	-				
d)	Secondary	-	-				
e)	Higher	-	-				
f)	Non-formal classes	√	-				
g)	Private coaching	-	-				
h)	Bridge Course	-	-				
i)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						-	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring		1	1	No Course		
b)	Beauty Culture						
c)	Computer						
d)	Jute bags and 'moti' work						
e)	Painting and Mehendi						
f)	Books binding						
g)	Printing						
h)	Auto Rickshaw/motor cycle/ mobile repairing						
i)	Candle making						
j)	Pickle making						
k)	Soap making						
l)	Textile Designing						
m)	Electrical trade						
n)	Shoes making/leather craft						

o)	Any other				
Whether instructors are trained				Yes	
If Yes, details of qualification				Master in Social Work Work experience YC.M	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				No	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Per Year	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				1:00 p.m. to 5:00 p.m. Monday to Friday	
What types of books provide for Children				Story book and general	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				Yes	

What types of Co-operation and Co-ordination received for homes	Counseling(Manus), Bal Bhawan, Art and Craft (HAQ)
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	Management Committee, Children Committee, Records Maintenance
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	Dated on 29 June, 2010 by Bench of Magistrate
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	Yes
If Yes,	
a) Number of Training Programmes organized	To be taken from the H.Q
b) Details of Training Programmes	Cutting and tailoring , Art and Craft
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
<b>DEPARTMENT/AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Manus foundation for good Mental health</li> <li>★ HAQ (for Counseling and Art and Craft)</li> <li>★ Bal Bhawan (Entertainment)</li> </ul>
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ The beds and the beddings are provided to the girls, the bed covers and bed sheets were taken</li> <li>★ The Staff strength seemed satisfactory, New Welfare W.O. and Guards have joined.</li> </ul>
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ Workshop on Juvenile Delinquency (Child Care and Protection) Act 2000</li> <li>★ Healthy interaction in b/w inter state workers for discussing their work experience</li> <li>★ Seminar on needs and Problems for working with Children</li> </ul>

<b>DELHI/02/GO/13</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Children Home for Girls-III (CHG-III) Sharda Greh</b>	
Contact Details				
a) Name of Superintendent/Secretary			Mrs. Usha Kadyan	
b) Address			Nari Niketan, Children Home for Girls-III, Nirmal Chhaya Complex	
c) Phone			-	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Government (Department of Women and Child Development, Govt. of NCT of Delhi)	
Year of Establishment of the Home			2010	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			30	
b) Present Strength			02	
Number of Children lodged in the home having families residing in the same State/UT			01	
Reasons for staying in the home in case of children having families (provide details)			Misconduct of family members with the child and refusal to accept their own child.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	2	-	2
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-

d)	1-2 years	2	-	2	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	0	-	-	
b)	Autism	0	-	-	
c)	Physically challenged	0	-	-	
d)	Any other (please specify)	Psychological illness		2	
What are the facilities and support services provided for the children staying in Home			Free lodging facility, Free Medical facility, Free Vocational Classes and Non Formal Education as well as recreational facilities like T.V, radio and Games.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			Government owned Institutions		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board		-		
b)	Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			As per JJ Act,2000 Specified norms & rules of JJ act are followed for children of CHG-III		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		√		
b)	Rented		-		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	4	1000 Sq. Ft.	25 / dormitory	24-I, 13-II
b)	Classrooms	2	App. 300 Sq. Ft	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	App. 450 Sq. Ft	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	1	App.1000 Sq. Ft	-	-
g)	Library	1	App. 300 Sq. Ft	-	-

h)	Counselling & Guidance room	1	App. 300 Sq. Ft	-	-	
i)	Office rooms	3	App. 250 Sq. Ft	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	5	App. 25 Sq. Ft	-	-	
l)	Separate Latrines for boys and girls	9	App. 25 Sq. Ft	-	-	
m)	Store room	1	250 Sq. Ft	-	-	
n)	Play Ground	2	3000 Sq. Ft	-	-	
o)	Vocational Training Centre	1	300 Sq. Ft	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/ Year)
a)	Superintendent/ Project Manager	1	1	M.A.	50568	June 2008
b)	Social Welfare Officer	1	1	M.A. BSW	15000	25 Nov. 2009
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	2	2	Graduate	-	10 Sep. 2008
j)	Music Teacher	1	1	ITI	35395	1 April 2001
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	-	23927	01 Aug. 2003
m)	Cook	1	1	Tenth	18953	07 Jan. 1994
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	8	8	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other	Chowkidar - 7	7	-	-	-
		W/W - 9	2	-	-	-
		C/T - 2	1	-	-	-
		H/C - 1	-	-	-	-

	Total	34			
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>					
Whether the organization is following any criteria for admission of children in Homes			Yes		
If Yes Please mention			Rescued from brothels and Prostitution		
Whether the organization maintains any specific Proforma for recording details of Information of every child			Yes		
If Yes, what kind of information you have collected from children			<ul style="list-style-type: none"> <li>★ Case History</li> <li>★ Copy of FIR</li> <li>★ Copy of 164 Crpc statement</li> <li>★ Medical Record</li> <li>★ HIV and other Sex-related diseases tests</li> <li>★ Regular Nrbing observing their behaviour and intensils</li> </ul>		
Maintenance of Registers/Record Maintenance					
S.No.	Details of Register		Please tick <input checked="" type="checkbox"/>		
a)	Admission and discharge register		<input checked="" type="checkbox"/>		
b)	Individual Care Plan		<input type="checkbox"/>		
c)	Supervision register		<input type="checkbox"/>		
d)	Medical file or medical report		<input checked="" type="checkbox"/>		
e)	Nutrition diet file		<input checked="" type="checkbox"/>		
f)	Stock Register		<input checked="" type="checkbox"/>		
g)	Visitor's book		<input checked="" type="checkbox"/>		
h)	Case file		<input checked="" type="checkbox"/>		
i)	Inquiry report file		<input type="checkbox"/>		
j)	Stock register		<input type="checkbox"/>		
k)	Any other(Please Specify)		<input type="checkbox"/>		
<b>Minimum Standard of Care</b>					
<b>MEDICAL CARE</b>					
What are the health related services available for Children			Mental Health Unit and Medical Care Unit.		
Does the home have a Medical Care Unit for health check-up of Children			Yes		
If yes, Opening of day, time and duration of MCU			Monday to Friday, 09:30 a.m. to 03:00 p.m. Saturday 09:30 a.m. to 01:00 p.m.		
Frequency of Doctor's visit			-		
Whether any trained Staff for first-aid			Yes		
Referral of Cases					
a)	Govt. Hospital		Yes		
b)	Dispensary		<input type="checkbox"/>		
c)	Any other		<input type="checkbox"/>		
How many children are suffering from communicable diseases and HIV/AIDS			0/ None		
Any specialized services are provided for such children			No		



If yes, Please provide in details		-					
Whether ambulance facility is available for patients		No					
Any other Facilities		When any Emergency or need arises taxi is hired, which is nearest to the office.					
<b>NUTRITION AND DIET SCALE</b>							
Whether any menu chart followed by homes		Yes, Balance diet provided					
How many times meals are provided in a day		Three Times					
What types of special diet is provided for sick infant or children		Depending upon the condition, Medical Officer prescribe the special diet which is provided to the child.					
How many cooks are there		Two					
Whether children are helping at the time of cooking in any way		Yes					
Whether any Nutrition and Child Development Officer is there		Yes					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	5 set			Per Year		
b)	Winter Clothing(Jersey)	2 set			2 Year		
c)	School Uniform	-			-		
d)	Under garments	6 set			Per Year		
e)	Towel	4 set			Per Year		
f)	Durry	1 / bed			Per 3 Year		
g)	Blanket	-			-		
h)	Pillow	Not provided due to sensitivity of cases					
i)	Shoes/ Chappal	1 / 1			Per Year		
j)	Tooth powder/paste	50 gm			Per Month		
k)	Soap	1			Per Month		
l)	Oil	100 gm			Per Month		
m)	Utensils (Plate and Glass)	1 + 1			-		
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes			No		
a)	Pre-school	-			√		
b)	Primary	-			√		
c)	Secondary	-			√		
d)	Higher	-			√		
e)	Non-formal classes	√			-		
f)	Private coaching	-			√		
g)	Bridge Course	Prepare for open exam			-		
h)	Any other	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number	Boys	Girls	Govt./	Distance of	Mode of

		of Children			Private	School	Travel
a)	Pre-school	0	-	-	-	-	-
b)	Primary	0	-	-	-	-	-
c)	Secondary	0	-	-	-	-	-
d)	Higher	0	-	-	-	-	-
e)	Non-formal classes	01	-	01	-	-	-
f)	Any other	0	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A	
Whether the educational facilities are adequate foe children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	01	01	-		
b)	Beauty Culture	-	In Process	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	In Process	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	In Process	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					Yes		
If Yes, details of qualification					ITI Tailoring and Cutting		
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					No		
Difficulty (if any)					-		
<b>RECREATIONAL FACILITIES</b>							
Whether recreational facilities are available					Yes		
If yes, what are the recreation facilities available for children in Institution							
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly			
a)	Indoor games	√		Daily			
b)	Outdoor games	√		Daily			
c)	Music	√		Daily			

d)	Television	√	Daily
e)	Picnic	-	-
f)	Outings	√	Yearly
g)	Cultural Programme	√	Occasionally
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not			Yes
If Yes, Opening timing or day			After 5:00 p.m. everyday
What types of books provide for Children			Based on social issues and rights miscellaneous magazines for recreation
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene		Yes/No
a)	Sufficient treated and filtered drinking water		Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises		Yes
c)	Proper drainage System		Yes
d)	Arrangements for disposal of garbage		Yes
e)	Protection from mosquitoes		Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)		Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)		Yes
h)	Sufficient space for washing		Yes
i)	Clean and fly-proof kitchen		Yes
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc			Yes
What type of Co-operation and Co-ordination has been received for homes			Social Worker for Non-formal education of Inmates
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes			Daily round by Welfare Officer and Superintendent as well as frequent visits by District Officer as well as from Department of Women and Child Development
Whether any specific evaluation of the Organization/Institution has been conducted in the past			Yes
If Yes, when and by whom			By Secretary of Women and Child Development and Social Welfare.
Whether CWC members visit your institution regularly			Yes
<b>TRAINING NEEDS</b>			

Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes, c) Number of Training Programmes organized	02
d) Details of Training Programmes	1) Organized by NIPCCD for the Superintendent of CHG-III, about the JJ Act. 2) Organized by NIPCCD for Welfare Officer upon the status and situations of girl child.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Subhakshika Education Society- Non Formal Education</li> <li>★ Ritanjali- Non Formal + Vocational Courses</li> <li>★ Holy Child Missionaries- Recreational + Cultural Programmes</li> </ul>
Suggestion of CWC/Inspection Committee	★ More 'Art of Living' Sessions for spiritual and personal calm and well being of children.
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>DELHI/03/GO/14</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Anukriti Children Home for Girls-II</b>	
Contact Details				
a) Name of Superintendent/Secretary			Mrs. Inderpreet	
b) Address			Children Home for Girls-II, Nirmal Chhaya Complex, New Delhi	
c) Phone			011-2852599	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Government (Department of Women and Child Development)	
Year of Establishment of the Home			1 <sup>st</sup> January, 1981	
Supported by			DWCD and State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			120	
Number of Children lodged in the home having families residing in the same State/UT			15	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	16	-	16
b)	5-10 years	50	-	50
c)	10-15 years	60	-	60
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	43	-	43
b)	4-6 month	20	-	20
c)	6-12 month	15	-	15
d)	1-2 years	24	-	24
e)	2-3 years	08	-	08
f)	3-4 years	05	-	05
g)	4-5 years	07	-	07

h)	More than 5 Years	04	-	04	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	0	-	-	
b)	Autism	0	-	-	
c)	Physically challenged	4	-	4	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			All facilities which covers JJ Act		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	4	-	25	40
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	6	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	12	-	-	-
l)	Separate Latrines for boys and girls	8	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	2	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient				Yes	

ventilation and Light						
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.S.W.	9300-34800	2-Dec. 2010
b)	Social Welfare Officer	3	3	M.S.W.	-	2 Years
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	2	2	M.B.B.S	18000	3 Years
f)	Paramedical Staff	-	3	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	2	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	1	-	-	-
j)	Music Teacher	-	1	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	1	-	-	-
m)	Cook	-	3	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	8	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	7	-	-	-
r)	Any other	-	-	-	-	-
	Total	6	32			
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					JJ Act Care and Protection	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					-	
Maintenance of Registers/Record Maintenance						
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>				
a)	Admission and discharge register	<input checked="" type="checkbox"/>				
b)	Individual Care Plan	<input checked="" type="checkbox"/>				
c)	Supervision register	<input checked="" type="checkbox"/>				
d)	Medical file or medical report	<input checked="" type="checkbox"/>				
e)	Nutrition diet file	<input checked="" type="checkbox"/>				
f)	Stock Register	<input checked="" type="checkbox"/>				
g)	Visitor's book	<input checked="" type="checkbox"/>				
h)	Case file	<input checked="" type="checkbox"/>				

i)	Inquiry report file	√	
j)	Stock register	-	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Mental Health Unit, Medical Care Unit and within the institution one small dispensary.	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Monday to Saturday, 09:00 a.m. to 03:00 p.m.	
Frequency of Doctor's visit		Monday- Saturday	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	Yes	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		N.A.	
Any specialized services are provided for such children		N.A.	
If yes, Please provide in details		N.A.	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		As per doctor's recommendation.	
How many cooks are there		Three	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	5	Year
b)	Winter Clothing(Jersey)	5	Year
c)	School Uniform	2	Year
d)	Under garments	6	Year
e)	Towel	3	Year
f)	Durry	1	Year
g)	Blanket	1	Year
h)	Pillow	1	Year
i)	Shoes/ Chappal	2	Year
j)	Tooth powder/paste	50g	Month



k)	Soap		1	Month			
l)	Oil		100gm	Month			
m)	Utensils (Plate and Glass)		1 Set	-			
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes				
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	-			
b)	Primary		-	-			
c)	Secondary		-	-			
d)	Higher		-	-			
e)	Non-formal classes		√	-			
f)	Private coaching		-	-			
g)	Bridge Course		-	-			
h)	Any other		-	-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	28	-	28	Govt.	3 km	Bus (DTC)
c)	Secondary	10	-	10	Govt.	3 Km	Bus (DTC)
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	74	-	74	NGO	Within institution	Walking
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						Institution needs pre-school for 3-5 years children	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	110	110	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/mobile repairing	-	-	-	-		

i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				-	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Weekly	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Occasionally	
h)	Yoga	-		-	
i)	Debates	√		Yearly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Monday – Friday, 10:00a.m. – 5:00p.m.	
What types of books provide for Children				Story books , Health related, Comics and General Knowledge	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			-	
g)	Sufficient number of bathrooms			-	

	(at least one bathroom for ten children)	
h)	Sufficient space for washing	-
i)	Clean and fly-proof kitchen	-
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		Manas Foundation(NGO) – Counseling and Psychiatric assessment
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Management Committee, Children Committee and Records Maintenance
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		Yes
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Manas Foundation ★ HAQ (Group work activity and counseling) ★ Bal Bhawan
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>DELHI/04/GO/15</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Ashiyana Children Home for Boys-II, Alipur, Delhi-36</b>	
Contact Details				
a) Name of Superintendent/Secretary			Sh. K.V. Sareen	
b) Address			<b>Opposite P.S. Alipur, Delhi</b>	
c) Phone			27202291	
d) Fax			Nil	
e) Email			Nil	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Government (Department of Women and Child Development, GNCT of Delhi)	
Year of Establishment of the Home			1980	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			192	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Family Disorganized, Bad Company	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	192	192
c)	10-15 years	-	-	-
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	42	42
b)	4-6 month	-	21	21
c)	6-12 month	-	38	38
d)	1-2 years	-	37	37
e)	2-3 years	-	28	28
f)	3-4 years	-	14	14
g)	4-5 years	-	12	12
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	

a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	1	1	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Lodging and Boarding, Education and Recreational Facilities, Playground		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			No		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Lodging and Boarding, Education and Recreational Facilities, Playground		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	6	-	6	4
b)	Classrooms	2	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	1	1
f)	Recreation room	1	-	-	-
g)	Library	0	-	0	0
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	3	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	5	-	5	4
l)	Separate Latrines for boys and girls	22	-	22	16
m)	Store room	4	-	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)			-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light			Yes		
<b>MANPOWER OF CHILDREN HOME</b>					

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A.	-	-
b)	Social Welfare Officer	2	2	M.S.W.	-	-
c)	Counselor	-	-	B.A.	-	-
d)	Case Worker	-	2	-	-	-
e)	Doctor (Part time or Full time)	2	2	-	-	-
f)	Paramedical Staff	1	1	-	-	-
g)	Educator	1	1	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	1	1	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	3	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other	-	-	-	-	-
	Total	8	13	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Children are admitted, Order by Competent Authority CWC
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Family Details, Family Background, Address, Contact No, Future Plan etc
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>

i)	Inquiry report file	-	
j)	Stock register	-	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		MCU run in campus	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Saturday, 9:30 a.m. to 5:00 p.m.	
Frequency of Doctor's visit		As per requirement and 3-4 times in a week	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	Yes	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		N.A.	
Any specialized services are provided for such children		No	
If yes, Please provide in details		N.A.	
Whether ambulance facility is available for patients		No	
Any other Facilities		Provide van facilities and part time doctor is available	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		4-5 Times	
What types of special diet is provided for sick infant or children		As per doctor's recommendation.	
How many cooks are there		Three	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	5	Yearly
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	4	Yearly
e)	Towel	3	Yearly
f)	Durry	1	In 2 Year
g)	Blanket	3	In 3 Year
h)	Pillow	1	In 2 Year
i)	Shoes/ Chappal	2	Year
j)	Tooth powder/paste	50g	Month
k)	Soap	1	Month

l)	Oil	-	-				
m)	Utensils (Plate and Glass)	2 Set	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes	No				
a)	Pre-school	-	√				
b)	Primary	√	-				
c)	Secondary	√	-				
d)	Higher	-	√				
e)	Non-formal classes	√	-				
f)	Private coaching	-	√				
g)	Bridge Course	-	√				
h)	Any other	-	√				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	106	106	-	Govt.	300 m	By Walk
c)	Secondary	1	1	-	Govt.	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	72	72	-	Private	In Home	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		



n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Monthly	
d)	Television	√		Monthly	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Monthly	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				N.A.	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				Yes	
What type of Co-operation and Co-ordination has been received for				Education and Computer	

homes	Knowledge
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	By CWC department and other Agencies from time to time
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes, c) Number of Training Programmes organized	2
d) Details of Training Programmes	→ AIDs/ HIV Awareness → Drug Addiction
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Subhakshika (NGO) ★ Hole-in-wal
Suggestion of CWC/Inspection Committee	★ Pattern of education should be improved, Staff should be trained accordingly. Some technical institute should be attached with the home for practically training to the resident children
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	No response

<b>DELHI/05/GO/16</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Bal Niketan</b>	
Contact Details				
a) Name of Superintendent/Secretary			Mrs. Meenakshi Mitra	
b) Address			<b>Bal Niketan , Nirmal Chhaya, jail Road</b>	
c) Phone			28520653	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Government	
Year of Establishment of the Home			-	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			35	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Segregation of female & male from the leprosy patient	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	26	3	29
c)	10-15 years	6	-	6
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	32	3	35
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys			
a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			N.A.			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No			
Any other registration			No			
Whether the Institution is certified as Fit Institution by			No			
a)	Juvenile Justice Board	N.A.				
b)	Child Welfare Committee	N.A.				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	3	-	-	-	
b)	Classrooms	2	-	-	-	
c)	Sick room/ First Aid Room	1	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	-	-	
f)	Recreation room	1	-	-	-	
g)	Library	1	-	-	-	
h)	Counselling & Guidance room	1	-	-	-	
i)	Office rooms	1	-	-	-	
j)	Workshops	0	-	-	-	
k)	Separate Bathrooms for boys and girls	1	-	-	-	
l)	Separate Latrines for boys and girls	10	-	-	-	
m)	Store room	2	-	-	-	
n)	Play Ground	1	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorar	Associated with the

					-um per month	Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	1	1	M.S.W.	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	1	1	12 <sup>th</sup>	10,000	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	1	10 <sup>th</sup>	2,000	-
n)	House Aunty	5	2	10 <sup>th</sup>	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	2	10 <sup>th</sup>	-	-
r)	Any other	-	-	-	-	-
	Total	11	7	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		
If Yes Please mention		
Whether the organization maintains any specific Proforma for recording details of Information of every child		
If Yes, what kind of information you have collected from children		
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	
b)	Individual Care Plan	
c)	Supervision register	
d)	Medical file or medical report	
e)	Nutrition diet file	
f)	Stock Register	
g)	Visitor's book	
h)	Case file	
i)	Inquiry report file	
j)	Stock register	
k)	Any other(Please Specify)	

<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children			
Does the home have a Medical Care Unit for health check-up of Children			
If yes, Opening of day, time and duration of MCU			
Frequency of Doctor's visit			
Whether any trained Staff for first-aid			
Referral of Cases			
a)	Govt. Hospital		
b)	Dispensary		
c)	Any other		
How many children are suffering from communicable diseases and HIV/AIDS			
Any specialized services are provided for such children			
If yes, Please provide in details			
Whether ambulance facility is available for patients			
Any other Facilities			
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes			
How many times meals are provided in a day			
What types of special diet is provided for sick infant or children			
How many cooks are there			
Whether children are helping at the time of cooking in any way			
Whether any Nutrition and Child Development Officer is there			
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing		
b)	Winter Clothing(Jersey)		
c)	School Uniform		
d)	Under garments		
e)	Towel		
f)	Durry		
g)	Blanket		
h)	Pillow		
i)	Shoes/ Chappal		
j)	Tooth powder/paste		
k)	Soap		
l)	Oil		
m)	Utensils (Plate and Glass)		
<b>EDUCATION</b>			
Whether educational facilities are available for children			
Are any of the educational facilities available within the institution			

S.No	Formal School on Premises	Yes	No				
a)	Pre-school						
b)	Primary						
c)	Secondary						
d)	Higher						
e)	Non-formal classes						
f)	Private coaching						
g)	Bridge Course						
h)	Any other						
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school						
b)	Primary						
c)	Secondary						
d)	Higher						
e)	Non-formal classes						
f)	Any other						
Whether the institution is providing any pocket money for out going students							
If Yes, then how much per child month							
Whether the educational facilities are adequate for children							
If No, what are the other facilities required							
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained							
If Yes, details of qualification							
Whether networking with any Institute/NGO/placement Agency for							

placement of children after completion of Course			
Difficulty (if any)			
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games		
b)	Outdoor games		
c)	Music		
d)	Television		
e)	Picnic		
f)	Outings		
g)	Cultural Programme		
h)	Yoga		
i)	Debates		
j)	Radio		
k)	Any Other		
<b>LIBRARY</b>			
Whether library facilities are available or not			
If Yes, Opening timing or day			
What types of books provide for Children			
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water		
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises		
c)	Proper drainage System		
d)	Arrangements for disposal of garbage		
e)	Protection from mosquitoes		
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)		
g)	Sufficient number of bathrooms (at least one bathroom for ten children)		
h)	Sufficient space for washing		
i)	Clean and fly-proof kitchen		
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc			
What type of Co-operation and Co-ordination has been received for homes			
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes			
Whether any specific evaluation of the Organization/Institution has			



been conducted in the past	
If Yes, when and by whom	
Whether CWC members visit your institution regularly	
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	
If Yes,	
a) Number of Training Programmes organized	
b) Details of Training Programmes	
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	
If Yes, Please specify	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	
Suggestion of CWC/Inspection Committee	
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	

<b>DELHI/06/GO/17</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		<b>Home for Healthy Female Children of Leprosy Patients</b>		
Contact Details				
a) Name of Superintendent/Secretary		Mrs. Meenakshi Mitra		
b) Address		<b>Bal Niketan , Nirmal Chhaya, Jail Road, Delhi</b>		
c) Phone		28520653		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>After Care Home</b>		
Run by		State Government		
Year of Establishment of the Home		-		
Supported by		State Government		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		100		
b) Present Strength		39		
Number of Children lodged in the home having families residing in the same State/UT		-		
Reasons for staying in the home in case of children having families (provide details)		Segregation of female from the leprosy patient		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	12	-	12
d)	15-18 years	27	-	27
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	39	-	39
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	

a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home				N.A.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				No		
Any other registration				No		
Whether the Institution is certified as Fit Institution by				No		
a)	Juvenile Justice Board	N.A.				
b)	Child Welfare Committee	N.A.				
If Yes, Please Specify the Facilities provided				-		
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	3	-	-	-	
b)	Classrooms	2	-	-	-	
c)	Sick room/ First Aid Room	1	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	-	-	
f)	Recreation room	1	-	-	-	
g)	Library	1	-	-	-	
h)	Counselling & Guidance room	1	-	-	-	
i)	Office rooms	1	-	-	-	
j)	Workshops	0	-	-	-	
k)	Separate Bathrooms for boys and girls	1	-	-	-	
l)	Separate Latrines for boys and girls	10	-	-	-	
m)	Store room	2	-	-	-	
n)	Play Ground	1	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/

						Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	1	1	M.S.W.	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	1	1	12 <sup>th</sup>	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	3	-	-	-	-
m)	Cook	3	1	10 <sup>th</sup>	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	1	1	10 <sup>th</sup>	-	-
p)	Helper	8	1	-	-	-
q)	Sweeper	2	2	10 <sup>th</sup>	-	-
r)	Any other : Peon	2	1	-	-	-
	Total	21	8	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes

If Yes Please mention

Whether the organization maintains any specific Proforma for recording details of Information of every child

If Yes, what kind of information you have collected from children

### Maintenance of Registers/Record Maintenance

S.No.	Details of Register	Please tick <input type="checkbox"/>
a)	Admission and discharge register	
b)	Individual Care Plan	
c)	Supervision register	
d)	Medical file or medical report	
e)	Nutrition diet file	
f)	Stock Register	
g)	Visitor's book	
h)	Case file	
i)	Inquiry report file	
j)	Stock register	
k)	Any other(Please Specify)	

### Minimum Standard of Care

### MEDICAL CARE

What are the health related services available for Children			
Does the home have a Medical Care Unit for health check-up of Children			
If yes, Opening of day, time and duration of MCU			
Frequency of Doctor's visit			
Whether any trained Staff for first-aid			
Referral of Cases			
a)	Govt. Hospital		
b)	Dispensary		
c)	Any other		
How many children are suffering from communicable diseases and HIV/AIDS			
Any specialized services are provided for such children			
If yes, Please provide in details			
Whether ambulance facility is available for patients			
Any other Facilities			
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes			
How many times meals are provided in a day			
What types of special diet is provided for sick infant or children			
How many cooks are there			
Whether children are helping at the time of cooking in any way			
Whether any Nutrition and Child Development Officer is there			
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing		
b)	Winter Clothing(Jersey)		
c)	School Uniform		
d)	Under garments		
e)	Towel		
f)	Durry		
g)	Blanket		
h)	Pillow		
i)	Shoes/ Chappal		
j)	Tooth powder/paste		
k)	Soap		
l)	Oil		
m)	Utensils (Plate and Glass)		
<b>EDUCATION</b>			
Whether educational facilities are available for children			
Are any of the educational facilities available within the institution			
S.No	Formal School on Premises	Yes	No
a)	Pre-school		
b)	Primary		

c)	Secondary						
d)	Higher						
e)	Non-formal classes						
f)	Private coaching						
g)	Bridge Course						
h)	Any other						
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school						
b)	Primary						
c)	Secondary						
d)	Higher						
e)	Non-formal classes						
f)	Any other						
Whether the institution is providing any pocket money for out going students							
If Yes, then how much per child month							
Whether the educational facilities are adequate foe children							
If No, what are the other facilities required							
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained							
If Yes, details of qualification							
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course							
Difficulty (if any)							
<b>RECREATIONAL FACILITIES</b>							

Whether recreational facilities are available			Yes
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games		
b)	Outdoor games		
c)	Music		
d)	Television		
e)	Picnic		
f)	Outings		
g)	Cultural Programme		
h)	Yoga		
i)	Debates		
j)	Radio		
k)	Any Other		
<b>LIBRARY</b>			
Whether library facilities are available or not			
If Yes, Opening timing or day			
What types of books provide for Children			
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water		
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises		
c)	Proper drainage System		
d)	Arrangements for disposal of garbage		
e)	Protection from mosquitoes		
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)		
g)	Sufficient number of bathrooms (at least one bathroom for ten children)		
h)	Sufficient space for washing		
i)	Clean and fly-proof kitchen		
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc			
What type of Co-operation and Co-ordination has been received for homes			
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes			
Whether any specific evaluation of the Organization/Institution has been conducted in the past			
If Yes, when and by whom			
Whether CWC members visit your institution regularly			

<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	
If Yes,	
a) Number of Training Programmes organized	
b) Details of Training Programmes	
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	
If Yes, Please specify	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	
Suggestion of CWC/Inspection Committee	
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	



<b>DELHI/01/ NGO/18</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Children of the World	
Address for Communication	Plot No. 5, PSP Pocket, Sec-8, Dwarka	
Telephone (with STD code)	011-253644671/169	
Fax	25364467	
Email ID	cwd@cti.org	
Website of Organization	-	
Type of Child Care Institution being run	Children home	
Whether run by	NGO	
Name and contact of Chief Functionary		
Vision of NGO		
Mission of NGO		
Key Objectives		
Major Activities		
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	Dec 1991	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
27 December, 1991	S-22467	New Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	231650754	
Any other Registration/ Recognition with Central / State Govt.:	Recognized by CARA Ministry of Women & Child Development	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	14	
Physical Assets of the Organization	Own Building and Furniture	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	-	
Total No. of Professional Staff		
a) Male	1	
b) Female	5	
Total number of		
a) Full Time	2	
b) Part time Staff	6	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
-		-		-	
-		-		-	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	-	-	-	-	Sponsorships and Adoption Fees
-	-	-	-	-	-
DOCUMENTATION					
Documents/communication material maintained at the organizational level				Annual Reports	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>				Mamta Child Care Centre	
Contact Details					
a) Name of Superintendent/Secretary				Mr. Raghunath	
b) Address				Plot No. 5, PSP Pocket, Sec-8, Dwarka	
c) Phone				011-25364467/169	
d) Fax				25364467	
e) Email				cwd@cti.org	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO	
Year of Establishment of the Home				1993	
Supported by				-	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				35	
b) Present Strength				18	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	10	3	13	
b)	5-10 years	2	2	4	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		

a)	0-4 month	4	-	4
b)	4-6 month	-	-	-
c)	6-12 month	-	1	1
d)	1-2 years	-	2	2
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	2	-	2

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	4	1	5
b)	Autism	-	-	-
c)	Physically challenged	1	-	1
d)	Any other (please specify)	-	-	-

Facilities and support services provided for the children staying in Home

Speech Therapist and Physiotherapist

Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960

No

Any other registration

No

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board

-

b) Child Welfare Committee

√

If Yes, Please Specify the Facilities provided

It provides quality child care services who need to be rehabilitated

**INFRASTRUCTURE**

Infrastructure available

a) Owned

√

b) Rented

-

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S.No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	24	12
b)	Classrooms	1			
c)	Sick room/ First Aid Room	1		1	
d)	Kitchen	2		-	
e)	Dinning Hall	1		-	
f)	Recreation room	1		-	
g)	Library			-	
h)	Counseling & Guidance room			-	
i)	Office rooms	2		-	
j)	Workshops			-	
k)	Separate Bathrooms for boys and girls	4		-	

l)	Separate Latrines for boys and girls	4		-	
m)	Store room	2		-	
n)	Play Ground	1		-	
o)	Vocational Training Centre	1		-	

Total area of the Campus (Sq. ft.) 500 sq. mts

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light -

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1		Rs.23000	1992
b)	Social Welfare Officer	-				
c)	Counselor	-				
d)	Case Worker	-				
e)	Doctor (Part time or Full time)	1			Rs. 10000	1993
f)	Paramedical Staff	-				
g)	Educator	-				
h)	Vocational Instructor	-				
i)	Store-keeper cum Accountant	1	1		Rs. 9000	1993
j)	Music Teacher	-				
k)	Sports/ Yoga Teacher	-				
l)	Driver	1	1		Rs. 7500	2008
m)	Cook	1	1			
n)	House Aunty	10	10		Rs 3500-4000	1997
o)	Security Guard	3	3			
p)	Helper	-				
q)	Sweeper	-				
r)	Any other (Please Specify)	Nurses 2	2		Rs. 8000	
	Total					

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Children who need care and protection works for restoration or rehabilitation through adoption
Whether the organization maintains any specific Proforma for	Yes

recording details of Information of every child			
If Yes, what kind of information you have collected from children		-	
<b>Maintenance of Registers/Record Maintenance</b>			
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register	<input checked="" type="checkbox"/>	
b)	<b>Individual Care Plan</b>	<input checked="" type="checkbox"/>	
c)	Supervision register		
d)	Medical file or medical report	<input checked="" type="checkbox"/>	
e)	Nutrition diet file	<input checked="" type="checkbox"/>	
f)	Stock Register	<input checked="" type="checkbox"/>	
g)	Visitor's book	<input checked="" type="checkbox"/>	
h)	<b>Case file</b>	<input checked="" type="checkbox"/>	
i)	<b>Inquiry report file</b>		
j)	Stock register	<input checked="" type="checkbox"/>	
k)	Any other(Please Specify)		
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
Health related services available for Children		Total Medical check- Blood test	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		It is always available	
Frequency of Doctor's visit		Once a week or on call	
Whether any trained Staff for first-aid		Yes	
<b>Referral of Cases</b>			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		Diet is provided depending on instruction of the Doctor	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	6	

b)	Winter Clothing(Jersey)	6	
c)	School Uniform	-	
d)	Under garments	5-6	
e)	Towel	2	
f)	Durry	1	
g)	Blanket	1	
h)	Pillow	1	
i)	Shoes/Chappal	2	
j)	Tooth powder/paste	1	
k)	Soap	1	
l)	Oil	-	
m)	Utensils (Plate and Glass)	-	

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	√	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	12	4	8	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children No

If No, what are the other facilities required  
Children are on remandand of different ages, so it is difficult to not applicable

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring				No Course

b)	Beauty Culture				
c)	Computer				
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing				
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				
k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		-	
d)	Television	√		Daily	
e)	Picnic	-		Once in Quarter	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Story books	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes,			Yes	

	maintenance & cleanliness of the premises	
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Department of Women and Child Development
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		-
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Adoption, Counselling, Sponsorship
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Genesis Foundation ★ Max Hospital for Eye Campus ★ Caledonian Society YMCA Vishwa Yuvak Kendra
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Finance for non-financing Personnel ★ Adoption Laws ★ Sponsorship



<b>DELHI/02/ NGO/19</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Salaam Baalak Trust	
Address for Communication	DDA Com Centre, IInd Floor, Chandi Wali Gali, Paharganj, New Delhi-55	
Telephone (with STD code)	011-23589305	
Fax	23584164	
Email ID	<a href="mailto:Salaambt12@rediffmail.com">Salaambt12@rediffmail.com</a>	
Website of Organization	<a href="http://www.salaambaalaktrust.com">www.salaambaalaktrust.com</a>	
Type of Child Care Institution being run	Children home Shelter Home/ Drop-in-Centre	
Whether run by	NGO	
Name and contact of Chief Functionary	Mrs. Praveen Nair , Contact No: 9818257109	
Vision of NGO	Rehabilitation of Street Children	
Mission of NGO	-	
Key Objectives	Shelter, Education, Vocational Training, Job Placement, Restoration	
Major Activities	Restoration & Education	
Target group/ Stakeholders	Children	
Geographical location/area	Central Zone, Delhi	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1988	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Indian Trust Act, 1908	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
1988	-	Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If No, give reasons thereof	2 homes recognized. Recognition of 3 homes under process	
Number of Governing Body Members	4 Trustees	
Physical Assets of the Organization	2 Own Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	130	
Total No. of Professional Staff		
a) Male	90	
b) Female	25	

Total number of					
a) Full Time				107	
b) Part time Staff				08	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
250.01		219.41		173.20	
Rupees in lakhs					
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
(In Kind) 10.00	4.54	17.95	123.26	135.59	4.64
-	-	-	-	-	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Reports, Brochure, Leaflet, Pamphlet, Audit report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Shelter Home, Salaam Baalak Trust	
Contact Details					
a) Name of Superintendent/Secretary				Mr. Shyam Singh	
b) Address				DDA Com Centre, IInd Floor, Chandi Wali Gali, Paharganj, New Delhi-55	
c) Phone				011-23589305	
d) Fax				23584164	
e) Email				<a href="mailto:Salaambt12@rediffmail.com">Salaambt12@rediffmail.com</a>	
<b>Type of Institution</b>				<b>Shelter Home</b>	
Run by				NGO	
Year of Establishment of the Home				2006	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				50	
b) Present Strength				65	
Number of Children lodged in the home having families residing in the same State/UT				No	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	20	20	
c)	10-15 years	-	45	45	

d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	30	30	
b)	4-6 month	-	25	25	
c)	6-12 month	-	10	10	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Shelter, Nutrition, Food, Medical Counseling, NFE, Restoration, Recreation, Health Hygiene		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			Indian Trust Act 1908		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Working under the Supervision of CW		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	-	-
b)	Classrooms	2			
c)	Sick room/ First Aid Room	1		-	
d)	Kitchen	1		-	
e)	Dinning Hall	-		-	
f)	Recreation room	1		-	
g)	Library	-		-	
h)	Counseling & Guidance room	1		-	

i)	Office rooms	1		-	
j)	Workshops	2		-	
k)	Separate Bathrooms for boys and girls	5		-	
l)	Separate Latrines for boys and girls	5		-	
m)	Store room	1		-	
n)	Play Ground	-		-	
o)	Vocational Training Centre	-		-	

Total area of the Campus (Sq. ft.)	1700 sq. feet
------------------------------------	---------------

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	No
---	----

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1			
b)	Social Welfare Officer	-	1			
c)	Counselor	-	1			
d)	Case Worker	-				
e)	Doctor (Part time or Full time)	-	1			
f)	Paramedical Staff	-	1			
g)	Educator	-	2			
h)	Vocational Instructor	-				
i)	Store-keeper cum Accountant	-	1			
j)	Music Teacher	-				
k)	Sports/ Yoga Teacher	-				
l)	Driver	-	1			
m)	Cook	-	2			
n)	House Aunty	-	1			
o)	Security Guard	-	-			
p)	Helper	-	1			
q)	Sweeper	-	1			
r)	Any other (Please Specify)	-	-			
	Total		14			

**CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
---	-----

If Yes Please mention	Above 5 Year, Reference by CWC
-----------------------	--------------------------------

Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Regarding home place and addresses causes of missing children
<b>Maintenance of Registers/Record Maintenance</b>		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		First Aid, Part time Doctor & Medical Social Worker
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		From the beginning
Frequency of Doctor's visit		Once a week
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	<input checked="" type="checkbox"/>
b)	Dispensary	<input checked="" type="checkbox"/>
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS		-
Any specialized services are provided for them		-
If yes, Please provide in details		-
Whether ambulance facility is available for patients		Yes
Any other Facilities		-
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Four Times
What types of special diet is provided for sick infant or children		Juice, Milk, Eggs etc.
How many cooks are there		Four
Whether children are helping at the time of cooking in any way		No
Whether any Nutrition and Child Development Officer is there		Yes
<b>CLOTHING AND BEDDING</b>		
How many sets of clothes, bedding and other articles are given to children		

S. No.	Item	Number	Frequency (Month/Year)				
a)	Summer Clothing	-	2				
b)	Winter Clothing(Jersey)	-	2				
c)	School Uniform	-	-				
d)	Under garments	-	2 set twice in a year				
e)	Towel	-	1 per child				
f)	Durry	-	-				
g)	Blanket	-	2 per child				
h)	Pillow	-	-				
i)	Shoes/Chappal	-	1 per child				
j)	Tooth powder/paste	-	Daily				
k)	Soap	-	Daily				
l)	Oil	-	Daily				
m)	Utensils (Plate and Glass)	-	For all				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
a)	Formal School on Premises	Yes	No				
b)	Pre-school	-	-				
c)	Primary	-	-				
d)	Secondary	-	-				
e)	Higher	-	-				
f)	Non-formal classes	√	-				
g)	Private coaching	-	-				
h)	Bridge Course	-	-				
i)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						-	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate foe children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			

a)	Cutting and tailoring				No Course
b)	Beauty Culture				
c)	Computer				
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing				
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				
k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				-	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Per week	
c)	Music	√		Twice a week	
d)	Television	√		Daily	
e)	Picnic	√		Per month	
f)	Outings	√		Per week	
g)	Cultural Programme	-		-	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				10:00 a.m. to 5:00 p.m.	
What types of books provide for Children				Story, Comics	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes,			Yes	

	maintenance & cleanliness of the premises	
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
	Whether the Organization/Institution is Networking with other Govt., NGOs etc	No
	What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>		
	Mechanism used by the Institution to monitor the activities of homes	-
	Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
	If Yes, when and by whom	25 October, 2010 CDPO. Gulabi Bagh Social Welfare Department
	Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>		
	Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	Yes
	If Yes, a) Number of Training Programmes organized	2
	b) Details of Training Programmes	-
	Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
	If Yes, Please specify	Prayas NGO- JJ Act
	Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Hospital ★ Police ★ Social Welfare Department ★ CWC ★ FHI
	Suggestion of CWC/Inspection Committee	-
	Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	★ JJ Act ★ Managerial Skills



<b>DELHI/03/ NGO/20</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Salaam Baalak Trust	
Address for Communication	DDA Com Centre, IInd Floor, Chandi Wali Gali, Paharganj, New Delhi-55	
Telephone (with STD code)	011-23589305	
Fax	23584164	
Email ID	<a href="mailto:Salaambt12@rediffmail.com">Salaambt12@rediffmail.com</a>	
Website of Organization	<a href="http://www.salaambaalaktrust.com">www.salaambaalaktrust.com</a>	
Type of Child Care Institution being run	Children home	
Whether run by	NGO	
Name and contact of Chief Functionary	Mrs. Praveen Nair , Contact No: 9818257109	
Vision of NGO	Rehabilitation of Street Children	
Mission of NGO	-	
Key Objectives	Shelter, Education, Vocational Training, Job Placement, Restoration	
Major Activities	Restoration & Education	
Target group/ Stakeholders	Children	
Geographical location/area	Central Zone, Delhi	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1988	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Indian Trust Act, 1908	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
1988	-	Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If No, give reasons thereof	2 homes recognized. Recognition of 3 homes under process	
Number of Governing Body Members	4 Trustees	
Physical Assets of the Organization	2 Own Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	130	
Total No. of Professional Staff		
a) Male	90	
b) Female	25	
Total number of		
a) Full Time	107	
b) Part time Staff	08	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
250.01		219.41		173.20	
Rupees in lakhs					
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
(In Kind)	4.54	17.95	123.26	135.59	4.64
10.00					
-	-	-	-	-	-
DOCUMENTATION					
Which of the following documents/communication material are maintained at the organizational level				Annual Reports, Brochure, Leaflet, Pamphlet, Audit report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>				Apna Ghar (SBT)	
Contact Details					
a) Name of Superintendent/Secretary				Mr. Kauti nath Mishra	
b) Address				DDA Community Centre, IInd Floor, Gali No. 1, Multani Dhandug, Paharganj, New Delhi-55	
c) Phone				011-23681803	
d) Fax					
e) Email				<a href="mailto:Salaambt12@rediffmail.com">Salaambt12@rediffmail.com</a>	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO	
Year of Establishment of the Home				2010	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				35	
b) Present Strength				58	
Number of Children lodged in the home having families residing in the same State/UT				No	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	8	8	
c)	10-15 years	-	30	30	
d)	15-18 years	-	20	20	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	

		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	21	21	
c)	6-12 month	-	15	15	
d)	1-2 years	-	22	22	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	1	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Shelter, Nutrition, Medical Counseling, NFE, Restoration, Recreation, Health Hygiene, Vocational Training		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			Indian Trust Act 1908		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			We are Provide Facilities under CWC		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	-	-
b)	Classrooms	2			
c)	Sick room/ First Aid Room	1		-	
d)	Kitchen	1		-	
e)	Dinning Hall	1		-	
f)	Recreation room	1		-	
g)	Library	-		-	
h)	Counseling & Guidance room	1		-	
i)	Office rooms	1		-	
j)	Workshops	-		-	

k)	Separate Bathrooms for boys and girls	3		-	
l)	Separate Latrines for boys and girls	3		-	
m)	Store room	1		-	
n)	Play Ground	-		-	
o)	Vocational Training Centre	-		-	
Total area of the Campus (Sq. ft.)				1900 sq. feet	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1			
b)	Social Welfare Officer	-	-			
c)	Counselor	-	1			
d)	Case Worker	-	1			
e)	Doctor (Part time or Full time)	-	1			
f)	Paramedical Staff	-	1			
g)	Educator	-	2			
h)	Vocational Instructor	-	-			
i)	Store-keeper cum Accountant	-	-			
j)	Music Teacher	-	-			
k)	Sports/ Yoga Teacher	-	1			
l)	Driver	-	1			
m)	Cook	-	-			
n)	House Aunty	-	-			
o)	Security Guard	-	2			
p)	Helper	-	-			
q)	Sweeper	-	1			
r)	Any other (Please Specify)	-	-			
Total						

#### **CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Above 5 Year, Reference by CWC
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes

If Yes, what kind of information you have collected from children		Regarding home placement. Addresses cause of Home Run Away	
<b>Maintenance of Registers/Record Maintenance</b>			
S.No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	$\checkmark$	
c)	Supervision register	$\checkmark$	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	$\checkmark$	
f)	Stock Register	$\checkmark$	
g)	Visitor's book	$\checkmark$	
h)	Case file	$\checkmark$	
i)	Inquiry report file	$\checkmark$	
j)	Stock register	$\checkmark$	
k)	Any other(Please Specify)		
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		First Aid, Part time Doctor & Medical Social Worker	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		From the beginning	
Frequency of Doctor's visit		Once a week	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	$\checkmark$	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for them		Yes	
If yes, Please provide in details		Medical Van	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		Provide Special Nutrition for Sick Children	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four Times	
What types of special diet is provided for sick infant or children		Juice, Milk, Eggs etc.	
How many cooks are there		Four	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)

a)	Summer Clothing	-	2 Sets
b)	Winter Clothing(Jersey)	-	2 Sets
c)	School Uniform	-	2 Sets
d)	Under garments	-	2 set in a year
e)	Towel	-	1 per child
f)	Durry	-	-
g)	Blanket	-	2 per child
h)	Pillow	-	-
i)	Shoes/Chappal	-	1 per child
j)	Tooth powder/paste	-	Daily
k)	Soap	-	Daily
l)	Oil	-	Daily
m)	Utensils (Plate and Glass)	-	For all

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	-	-
f)	Non-formal classes	√	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	25	-	-	-	-	-
c)	Secondary	7	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	20	-	-	-	-	-
f)	Any other	6	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month As a Conveyance Schooling Time

Whether the educational facilities are adequate foe children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring				No Course
b)	Beauty Culture				

c)	Computer	35			One year
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing				
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				
k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Once a month	
f)	Outings	√		Per week	
g)	Cultural Programme	-		Monthly	
h)	Yoga	√		Daily	
i)	Debates	-		Weekly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				10:00 a.m. to 5:00 p.m.	
What types of books provide for Children				Story Books, GK	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	

d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		With Schools, Hospitals and Police
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Yes
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		14 September, 2010
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		1
b) Details of Training Programmes		About JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		At Prayas Institute on JJ Act
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ CWC ★ FHI
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ JJ Act ★ Managerial Skills



<b>DELHI/04/ NGO/21</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Manav Mandir Mission Trust	
Address for Communication	Janash Ram Roop Vihar, Sarai Kale Khan, Delhi.	
Telephone (with STD code)	011-2632000, 011-26327911	
Fax	011-26821348	
Email ID	<a href="mailto:contact@manavmandir.com">contact@manavmandir.com</a>	
Website of Organization	<a href="http://www.manavmandir.com">www.manavmandir.com</a>	
Type of Child Care Institution being run	Children home and Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Mr. Arun Tiwari(Manager)	
Vision of NGO	Orphanage Education	
Mission of NGO	Orphanage Services	
Key Objectives	Services and Education of Orphanages	
Major Activities	Social Work	
Target group/ Stakeholders	Children and Women	
Geographical location/area	KH-57 Jain Ashram Ring Road Opposite Sarai Kale Khan, behind Indian Oil Petrol Pump	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	31 November, 1989	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Trust Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
03 November, 1989	287	Ludhiana
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	231650918	
Any other Registration/ Recognition with Central / State Govt.:	State Govt., Delhi	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	License JJ Act 2000-2006 Women and Child Development Department	
If No, give reasons thereof	-	
Number of Governing Body Members	5	
Physical Assets of the Organization	Yes	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	30	
Total No. of Professional Staff		
a) Male	13	

b) Female		03		
Total number of				
a) Full Time		12		
b) Part time Staff		18		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09	2007-08	
2084,600		3992702	3501095	
Sources of Funding of the NGO (Cash/kind/other)				
International	National	State Govt.	Community Support	
			√	
Donation		Any Other (Please specify)		
√				
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level		Annual Reports, Brochure, Leaflet, Pamphlet, Audit report, Website (Any Other)		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		Manav Mandir Mission Trust		
Contact Details				
a) Name of Superintendent/Secretary		Mr. Arun Tiwari		
b) Address		Jain Ashram Sakhikale Khan		
c) Phone		011-26320000, 9999609878		
d) Fax		26821348		
e) Email		contact@manavmandir.com		
<b>Type of Institution</b>		<b>Children Home (Both Boys and Girls)</b>		
Run by		NGO (Women and Child Department)		
Year of Establishment of the Home		03 November, 1989		
Supported by		Other		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		20		
b) Present Strength		26		
Number of Children lodged in the home having families residing in the same State/UT		16		
Reasons for staying in the home in case of children having families (provide details)		Financially weak family children and single family, divorce family and disease family.		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	05	11	16
c)	10-15 years	02	04	06

d)	15-18 years	-	04	04	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	01	01	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Medical/ Health facilities, Brooding, School dress and Clothes, Food and Proper Diet- Milk, Fruit and Recreation.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			Women and Child Welfare Department		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			All children are being provided food, lodging, medical and education facility 24*7 (in the home)		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	-	-	-
b)	Classrooms	1	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	2	-	-	-
e)	Dinning Hall	1	-	-	-

f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-
h)	Counseling & Guidance room	1	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	1	-	-	-
k)	Separate Bathrooms for boys and girls	4 (2+2)	-	-	-
l)	Separate Latrines for boys and girls	4 (2+2)	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	2	-	-	-
o)	Vocational Training Centre	1	-	-	-

Total area of the Campus (Sq. ft.)

3700 Sq. / meter

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light

Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	01	01	Graduate	11000/-	20 Dec. 99
b)	Social Welfare Officer	01	01	MSW	Honorar.	25 Feb. 02
c)	Counselor	-	-	MSW	9000	09 Nov.08
d)	Case Worker	-	-	MSW	9000	09 Nov.08
e)	Doctor (Part time or Full time)	01	01	M.B.B.S	1000	04 Jan.2000
f)	Paramedical Staff	01	01	Nurse	3500	25 Aug. 02
g)	Educator	02	02	Graduate	7000	01 Jan.02
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	01	01	Inter	4000	03 Oct. 09
j)	Music Teacher	-	-	-	-	20 Dec. 99
k)	Sports/ Yoga Teacher	03	03	Trained	Honorar.	10 June 08
l)	Driver	01	01	Trained	5000	01 Aug. 08
m)	Cook	01	01	Trained	4500	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	02	02	Illiterate	3000	01 Aug. 09
p)	Helper	01	01	Fifth	2500	09 Sep. 09
q)	Sweeper	01	01	Illiterate	3000	01 Jan. 02
r)	Any other (Please Specify)	-	-	-	-	-
	Total					

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes	
If Yes Please mention	Poor Family and Single Parents	
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes	
If Yes, what kind of information you have collected from children	Children age proof, Residence proof, Income proof, Admission reason, letter etc.	
<b>Maintenance of Registers/Record Maintenance</b>		
S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children	Medical Health Check-up	
Does the home have a Medical Care Unit for health check-up of Children	Yes	
If yes, Opening of day, time and duration of MCU	24*7	
Frequency of Doctor's visit	Twice a week	
Whether any trained Staff for first-aid	Yes	
Referral of Cases		
a)	Govt. Hospital	-
b)	Dispensary	-
c)	Any other	<input checked="" type="checkbox"/>
How many children are suffering from communicable diseases and HIV/AIDS	None	
Any specialized services are provided for them	No	
If yes, Please provide in details	No	
Whether ambulance facility is available for patients	Yes	
Any other Facilities	Emergency service for Staff and Children 24*7	
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes	Yes	
How many times meals are provided in a day	Three times	
What types of special diet is provided for sick infant or children	As per prescription given by the Doctor	

How many cooks are there		Four					
Whether children are helping at the time of cooking in any way		No					
Whether any Nutrition and Child Development Officer is there		Yes					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	02			Twice a Year		
b)	Winter Clothing(Jersey)	02			-		
c)	School Uniform	02			-		
d)	Under garments	02			-		
e)	Towel	02			-		
f)	Durry	02			-		
g)	Blanket	02			-		
h)	Pillow	01			-		
i)	Shoes/Chappal	02			-		
j)	Tooth powder/paste	01			-		
k)	Soap	02			-		
l)	Oil	1			-		
m)	Utensils (Plate and Glass)	All			-		
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
a)	Formal School on Premises	Yes			No		
b)	Pre-school	-			-		
c)	Primary	-			-		
d)	Secondary	-			-		
e)	Higher	-			-		
f)	Non-formal classes	-			-		
g)	Private coaching	√			-		
h)	Bridge Course	-			-		
i)	Any other	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	02	02	-	Private	5 km	Van
b)	Primary	17	10	05	Private	5 km	Van
c)	Secondary	-	-	-	-	-	-
d)	Higher	05	05	-	Private	5 km	Van
e)	Non-formal classes	01	-	01	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						Yes	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate foe children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							

Whether the homes have vocational training facilities for children				No	
If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring				
b)	Beauty Culture				
c)	Computer				
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing				
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				
k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				
Whether instructors are trained				N.A.	
If Yes, details of qualification				N.A.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				Need Funds for Vocational Training Programme	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Per Week	
c)	Music	√		Per Week	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Twice in a Year	
h)	Yoga	√		Daily	
i)	Debates	√		Monthly	
j)	Radio	√		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Schools Books, Stories Books, Current Affairs, Newspapers, Spiritual Books etc.	

<b>SANITATION AND HYGIENE</b>		
Whether Sanitation and Hygiene is maintained in the home through following facilities		
S.No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Care and Protection by home commending body
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a)	Number of Training Programmes organized	-
b)	Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		★ Good activities in the NGO and Complete records.
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Our Staff members would like to attend the training programmes of Children development and Health related issues.



<b>DELHI/05/ NGO/22</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Minda Bal Gram, Moga Devi Minda Charitable Trust	
Address for Communication	Holambi Khurd Road, Alipur, Delhi-110036	
Telephone (with STD code)	011-27202102	
Fax	-	
Email ID	<a href="mailto:mlal@mindabalgram.org">mlal@mindabalgram.org</a>	
Website of Organization	<a href="http://www.mindabalgram.org">www.mindabalgram.org</a>	
Type of Child Care Institution being run	Children home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sh. Sanjay Joshi, Director	
Vision of NGO	Our dreams of reaching out to the disadvantaged people through creating conducive environment for improved quality of life.	
Mission of NGO	Its strives to develop the competency of underprivileged through participation, advocacy & empowerment leading towards sustainable development and protection of the democratic values.	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	07 September, 2001	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	JJ Act, 2000	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
07 September,2001	DCWD/CW/CH/2009	Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No. DWCD/CW/CH/2009/U/S 34 of JJ Act-2000	
If No, give reasons thereof	-	
Number of Governing Body Members	-	
Physical Assets of the Organization	Yes	
<b>MANPOWER OF ORGANIZATION</b>		

Total manpower of your Organization		24		
Total No. of Professional Staff				
a) Male		03		
b) Female		01		
Total number of				
a) Full Time		19		
b) Part time Staff		05		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09	2007-08	
38.37		37.90	34.50	
Sources of Funding of the NGO (Cash/kind/other)				
International	National	State Govt.	Community Support	
			Donation	
			Any Other (Please specify)	
			CSR initiative of Minda Group of Industries	
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level		Brochure and Audit report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		Minda Bal Gram		
Contact Details				
a) Name of Superintendent/Secretary		Mr. Sanjay Joshi, Director		
b) Address		Minda Bal Gram, Alipur, Delhi		
c) Phone		9910110150		
d) Fax		-		
e) Email		<a href="mailto:Sanjayjoshi16@yahoo.com">Sanjayjoshi16@yahoo.com</a>		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		NGO (Moga Devi Minda Charitable Trust (regd))		
Year of Establishment of the Home		-		
Supported by		Other		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		100		
b) Present Strength		94		
Number of Children lodged in the home having families residing in the same State/UT		-		
Reasons for staying in the home in case of children having families (provide details)		-		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	

a)	0-5 years	-	-	-
b)	5-10 years	17	06	23
c)	10-15 years	28	26	54
d)	15-18 years	07	10	17

Details of Stay of Children in the home

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

Education, Life Skills, Health Care Facilities, Recreation, Sports and games.

Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960

Yes

Any other registration

-

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board

-

b) Child Welfare Committee

√

If Yes, Please Specify the Facilities provided

To provide all facilities

**INFRASTRUCTURE**

Infrastructure available

a) Owned

√

b) Rented

-

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	14	8500 Approx.	-	-
b)	Classrooms	5	16 * 20	-	-
c)	Sick room/ First Aid Room	1	16 * 20	-	-
d)	Kitchen	1	20 * 15	-	-
e)	Dinning Hall	1	60 * 20	-	-
f)	Recreation room	2	30 * 20	-	-

g)	Library	1	24 * 20	-	-
h)	Counseling & Guidance room	1	12 * 15	-	-
i)	Office rooms	1	30 * 20	-	-
j)	Workshops	1	45 * 30	-	-
k)	Separate Bathrooms for boys and girls	27	4 * 4	-	-
l)	Separate Latrines for boys and girls	30	4 * 3	-	-
m)	Store room	3	900 Sq. Ft	-	-
n)	Play Ground	2	200 * 150	-	-
o)	Vocational Training Centre	1	30 * 30	-	-

Total area of the Campus (Sq. ft.) 4.16 Acres

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A. PG Diploma in NGO Management		2001
b)	Social Welfare Officer	1	1	MSW		2003
c)	Counselor	1	1	M.A. (Psychology)		2008
d)	Case Worker	-	-	-		2008
e)	Doctor (Part time or Full time)	1	1	MBBS		-
f)	Paramedical Staff	-	-	-		-
g)	Educator	3	3	B.Sc.		-
h)	Vocational Instructor	-	-	-		-
i)	Store-keeper cum Accountant	1	1	Matric		-
j)	Music Teacher	-	-	-		-
k)	Sports/ Yoga Teacher	1	1	B. Ed.		2005
l)	Driver	1	1	Middle		2003
m)	Cook	4	3	Middle		2004
n)	House Aunty	5	5	Primary		2003
o)	Security Guard	2	2	Matric		2004
p)	Helper	1	1	Middle		2006
q)	Sweeper	1	1	Primary		2003
r)	Any other (Please Specify)	Gardner- 1	1	Primary	-	2003

	Total	23	22		
<b>CRITERIA FOR ADMISSION IN SHELTER HOMES</b>					
Whether the organization is following any criteria for admission of children in Homes			Yes		
If Yes Please mention			3 to 8 years of Children are admitted		
Whether the organization maintains any specific Proforma for recording details of Information of every child			Yes		
If Yes, what kind of information you have collected from children			Maintaining Personal files and by Counselling		
Maintenance of Registers/Record Maintenance					
S.No.	Details of Register		Please tick $\checkmark$		
a)	Admission and discharge register		$\checkmark$		
b)	Individual Care Plan		$\checkmark$		
c)	Supervision register		$\checkmark$		
d)	Medical file or medical report		$\checkmark$		
e)	Nutrition diet file		$\checkmark$		
f)	Stock Register		$\checkmark$		
g)	Visitor's book		$\checkmark$		
h)	Case file		$\checkmark$		
i)	Inquiry report file		$\checkmark$		
j)	Stock register		$\checkmark$		
k)	Any other(Please Specify)		-		
<b>Minimum Standard of Care</b>					
<b>MEDICAL CARE</b>					
What are the health related services available for Children			Visit of MBBS doctor weekly and group med claim Policy		
Does the home have a Medical Care Unit for health check-up of Children			Yes		
If yes, Opening of day, time and duration of MCU			-		
Frequency of Doctor's visit			Weekly		
Whether any trained Staff for first-aid			No		
Referral of Cases					
a)	Govt. Hospital		$\checkmark$		
b)	Dispensary		-		
c)	Any other		$\checkmark$ (Sri Action Balaji Medical Institute and Maharaja Agarsen Medical Hospital)		
How many children are suffering from communicable diseases and HIV/AIDS			None		
Any specialized services are provided for them			Yes		
If yes, Please provide in details			<ul style="list-style-type: none"> <li>➤ An MBBS Doctor visits once a week</li> <li>➤ Arrange Educational Tour in Holiday</li> </ul>		
Whether ambulance facility is available for patients			Yes		
Any other Facilities			Organisation own Vehicles.		
<b>NUTRITION AND DIET SCALE</b>					
Whether any menu chart followed by homes			Yes		

How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	As advised by doctor
How many cooks are there	Three
Whether children are helping at the time of cooking in any way	In Holidays Only
Whether any Nutrition and Child Development Officer is there	No

### **CLOTHING AND BEDDING**

How many sets of clothes, bedding and other articles are given to children

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2 Pairs	Yearly
b)	Winter Clothing(Jersey)	2 Pairs	Yearly
c)	School Uniform	2 Pairs	Yearly
d)	Under garments	4 Pairs	Yearly
e)	Towel	2 Pairs	Yearly
f)	Durry	1 PC	Yearly
g)	Blanket	1 PC	Yearly
h)	Pillow	1 PC	Yearly
i)	Shoes/Chappal	2 Pairs	Yearly
j)	Tooth powder/paste	-	Tooth Brush-Quarterly
k)	Soap	1 PC	Month
l)	Oil	50 gms	Month
m)	Utensils (Plate and Glass)	1 Set	Yearly

### **EDUCATION**

Whether educational facilities are available for children

Yes

Are any of the educational facilities available within the institution

		Yes	No
a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	√	-
g)	Private coaching	√	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	2-8 km	Mini Buses and Jeep
b)	Primary	27	07	20	-	-	Mini Buses and Jeep
c)	Secondary	64	35	29	-	-	Mini Buses and Jeep
d)	Higher	02	-	02	-	-	Mini Buses and Jeep

e)	Non-formal classes	01	-	01	-	-	Mini Buses and Jeep
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						Yes	
If Yes, then how much per child month						As and When required. Especially when the children go on educational tour.	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	12	12	24	45 days		
b)	Beauty Culture						
c)	Computer	9	5	14	75 days		
d)	Jute bags and 'moti' work						
e)	Painting and Mehendi						
f)	Books binding						
g)	Printing						
h)	Auto Rickshaw/motor cycle/mobile repairing						
i)	Candle making						
j)	Pickle making						
k)	Soap making						
l)	Textile Designing						
m)	Electrical trade						
n)	Shoes making/leather craft						
o)	Any other						
Whether instructors are trained						Yes	
If Yes, details of qualification						ITI in Tailoring and cutting and have rich experience more than 10 years in the field	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course						No	
Difficulty (if any)						-	
<b>RECREATIONAL FACILITIES</b>							
Whether recreational facilities are available						Yes	
If yes, what are the recreation facilities available for children in Institution							
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly			
a)	Indoor games	√		Daily			
b)	Outdoor games	√		Daily			
c)	Music	√		Daily			
d)	Television	√		Daily			
e)	Picnic	√		Yearly			

f)	Outings	√	Yearly
g)	Cultural Programme	√	Occasionally
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		09:00 – 05:00 p.m.	
What types of books provide for Children		Autobiography of greet man and General Knowledge	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What types of Co-operation and Co-ordination received for homes		Participation in each other Programmes	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		Supervision and Reporting Work	
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes	
If Yes, when and by whom		Occasionally by CWC members	
Whether CWC members visit your institution regularly		Yes	
<b>TRAINING NEEDS</b>			
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes	
If Yes,			
a)	Number of Training Programmes organized	2	
b)	Details of Training Programmes	➤ A week long training on Child Rights and Child Protection by NIPCCD ➤ Five Day training on counseling skills on Child Protection in Collaboration with National Institute of Social Defence.	



Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	From NISD, NIPCCD, SAMARTH, NAAJ Foundation, CHETNA
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Mahatma Gandhi Institute of Rural Development</li> <li>★ Minda Group of Industries</li> <li>★ Delhi Services of Legal Authority</li> <li>★ Different NGO's</li> <li>★ Childline</li> </ul>
Suggestion of CWC/Inspection Committee	★ Child Welfare Committee declared Minda Bal Gram a Fit Institution
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ Counseling Skills</li> <li>★ Child Care and Protection</li> <li>★ Child Abuse and Exploitation</li> <li>★ Child Psycho</li> </ul>

<b>DELHI/06/ NGO/23</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Prayas Juvenile Aid: Centre Society	
Address for Communication	59, Tughalkabad Institutional Area, New Delhi – 110062	
Telephone (with STD code)	9511-29955505, 29956244	
Fax	91-11-29955505	
Email ID	prayas@prayaschildren.org	
Website of Organization	-	
Type of Child Care Institution being run	Shelter Home/ Drop-in-Centre	
Whether run by	NGO	
Name and contact of Chief Functionary	Mr. Saroj Kumar Swain (Director) 9810624285	
Vision of NGO	Childhood restoration of deprived	
Mission of NGO	Welfare Programmes for above vision	
Key Objectives	Help deprived, destitutes, needy children	
Major Activities	Rescue, Rehabilitation, Restoration, Research etc.	
Target group/ Stakeholders	Children, Women and Adolescent	
Geographical location/area	Currently 8 States and U.T. in India	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	28 August, 1989	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Societies Registration Act, 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
29 August, 1989	S-20291	Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	2316506817	
Any other Registration/ Recognition with Central / State Govt.:	80G, 35AC, 10(23)©(iv)	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No. DWCD/CW/CH/11/2009/U/S 34	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	22	
Physical Assets of the Organization	Yes, Building, Furniture, Vehicles, Equipments etc.	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	604	
Total No. of Professional Staff	604	
a) Male	406	
b) Female	198	
Total number of		

a) Full Time				516	
b) Part time Staff				88	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
907.65		1104.39		984.95	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
√	√	√		√	Sponsorship
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Leaflet, Pamphlet, Audit Report and any Other (I.E.C. Materials like charts, boards)		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Prayas Railway Children Project Home, Lahori Gate, Delhi-06		
Contact Details					
a) Name of Superintendent/Secretary			Mr. Varun Nautiyal, Manager		
b) Address			Ghajiabad, U.P.		
c) Phone			9717255087		
d) Fax			-		
e) Email			<a href="mailto:Varun.prayas@gmail.com">Varun.prayas@gmail.com</a>		
<b>Type of Institution</b>			<b>Shelter Home</b>		
Run by			NGO (Prayas Juvenile Aid Centre Society)		
Year of Establishment of the Home			-		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			15		
b) Present Strength			15		
Number of Children lodged in the home having families residing in the same State/UT			N.A.		
Reasons for staying in the home in case of children having families (provide details)			Abusive home environment, Poor parents and Escaping Studies etc.		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	04	04	
c)	10-15 years	-	11	11	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	08	08
b)	4-6 month	-	03	03
c)	6-12 month	-	04	04
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

N.A.

Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960

No

Any other registration

N.A.

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board

√

b) Child Welfare Committee

√

If Yes, Please Specify the Facilities provided

Child Care facilities like Clothes, Foot wares, food, Bedding, Entertainment, Vocational Training, Fire Safety Measures, Heaters, Coolers, etc.

**INFRASTRUCTURE**

Infrastructure available

In partnership with the Railway Women Welfare Organisation and Railway Authorities

a) Owned

-

b) Rented

-

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	22'14'13-5'	18	15
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	13'14'10'	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-

h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	12'15'8-5'	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	1	4-5'3-5'8'	-	-
l)	Separate Latrines for boys and girls	1	4-5'4'8'	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 92 Sq. Meters

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Post Graduation PGDIRPM	15,000/-	18 months
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	Graduation	8,000/-	7 months
d)	Case Worker	1	1	Graduation	8,000/-	7 months
e)	Doctor (Part time or Full time)	1	1	M.D. MBBS	7,000/-	8 months
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	1	1	Graduation	6,000/-	8 months
h)	Vocational Instructor	1	1	Graduation	6,000/-	8 months
i)	Store-keeper cum Accountant	1	1	Graduation	8,000/-	2 Years
j)	Music Teacher	Hired From Head Office				
k)	Sports/ Yoga Teacher	Hired From Head Office				
l)	Driver	1	1	12 <sup>th</sup>	5,000/-	2 years
m)	Cook	2	2	8 <sup>th</sup>	5,000/-	3 years
n)	House Aunty	-	-	-	-	-
o)	Security Guard	1	1	5 <sup>th</sup>	5,000/-	1 years
p)	Helper	1	1	5 <sup>th</sup>	3,000/-	8 months
q)	Sweeper	1	1	-	3,000/-	2 years
r)	Any other (Please Specify)	Care Takers- 2	2	8 <sup>th</sup>	3,000/-	4 years
	Total	13	13	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention	As per JJ Act and referred by C.W.C.	
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes	
If Yes, what kind of information you have collected from children	Socio Economic, Demo Graphics, Family Background, If any form of abuse etc.	
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	N.E.E. Attendance <input checked="" type="checkbox"/>
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children	Weekly health checkups and referrals	
Does the home have a Medical Care Unit for health check-up of Children	Yes	
If yes, Opening of day, time and duration of MCU	Weekly Visits	
Frequency of Doctor's visit	Once a week	
Whether any trained Staff for first-aid	Yes	
Referral of Cases		
a)	Govt. Hospital	<input checked="" type="checkbox"/>
b)	Dispensary	<input checked="" type="checkbox"/>
c)	Any other	<input checked="" type="checkbox"/> (Put Doctors and O.P.Ds)
How many children are suffering from communicable diseases and HIV/AIDS	One from T.B.	
Any specialized services are provided for them	Yes	
If yes, Please provide in details	➤ Special Diet, D.O.T.S, Supplements, Regular Visit to specialists, Follow-ups etc.	
Whether ambulance facility is available for patients	Yes	
Any other Facilities	Specific Nutritional Supplements	
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes	Yes	
How many times meals are provided in a day	Four	
What types of special diet is provided for sick infant or children	Nutritional Supplements like Vitamin tabs, protean, Chwanprash, non-vegetable, green and clean vegetables etc.	
How many cooks are there	Two	

Whether children are helping at the time of cooking in any way		N.A.					
Whether any Nutrition and Child Development Officer is there		Yes					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	2 Sets			Every 4 Months		
b)	Winter Clothing(Jersey)	1 Set			Every 4 Months		
c)	School Uniform	2 Sets			Every 4 Months		
d)	Under garments	2 Sets			Every 4 Months		
e)	Towel	1 Set			Every 2 Months		
f)	Durry	2 Sets			Every 6-7 Months		
g)	Blanket	3 Sets			Whenever required		
h)	Pillow	-			-		
i)	Shoes/Chappal	1 Set			Every 4 Months		
j)	Tooth powder/paste	1 Set			Every 4 Months		
k)	Soap	1 Set			Every 4 Months		
l)	Oil	1 Set			Every 4 Months		
m)	Utensils (Plate and Glass)	1 Set			Every 4 Months		
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
a)	Formal School on Premises	Yes			No		
b)	Pre-school	√					
c)	Primary	√					
d)	Secondary				√		
e)	Higher				√		
f)	Non-formal classes	√					
g)	Private coaching	√					
h)	Bridge Course	√					
i)	Any other Educational Counseling	√					
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	2-8 km	Mini Buses and Jeep
b)	Primary	-	-	-	-	-	Mini Buses and Jeep
c)	Secondary	-	-	-	-	-	Mini Buses and Jeep
d)	Higher	-	-	-	-	-	Mini Buses and Jeep
e)	Non-formal classes	-	-	-	-	-	Mini Buses and Jeep
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	

If Yes, then how much per child month					N.A.
Whether the educational facilities are adequate for children					Yes
If No, what are the other facilities required					N.A.
<b>VOCATIONAL TRAINING</b>					
Whether the homes have vocational training facilities for children					Yes
If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring				
b)	Beauty Culture				
c)	Computer	15		15	Continuous
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing				
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				
k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				
Whether instructors are trained					Yes
If Yes, details of qualification					Graduation and trained in Computer Applications
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					Yes
Difficulty (if any)					N.A.
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					Yes
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		As per demand of children	
d)	Television	√		Daily	
e)	Picnic	√		Once a month	
f)	Outings	√		Once a month	
g)	Cultural Programme	√		Occasionally	
h)	Yoga	√		Daily	
i)	Debates	√		Once a week	
j)	Radio	-		-	
k)	Any Other Special movies, learning	√		Once a week	



	animation	
<b>LIBRARY</b>		
Whether library facilities are available or not		Yes
If Yes, Opening timing or day		Opened round the clock
What types of books provide for Children		Story books, play and learning, primary, Hindi, English books etc.
<b>SANITATION AND HYGIENE</b>		
Whether Sanitation and Hygiene is maintained in the home through following facilities		
S.No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Registration and technical support.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Supervisory visits reports, feedback from authorities etc.
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		C.W.C. and by Social Welfare Department.
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a)	Number of Training Programmes organized	2
b)	Details of Training Programmes	➤ Management and Operation of Institutional care Facilities ➤ Children Protection and JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Prayas being a credible and reputed NGO, keeps on attending training programmes/ consultancies/ workshops/

	seminars at various forums.
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Social Welfare Department</li> <li>★ Child Welfare Committee</li> <li>★ Railway Authorities</li> <li>★ N.R.W.W.O</li> <li>★ Railway Protection Force</li> <li>★ Government Railway Police</li> <li>★ Local Police and Governing Bodies etc</li> </ul>
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ Continue the work for Children Care and Development</li> <li>★ Take Care of their health and hygiene properly</li> </ul>
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ Child Protection</li> <li>★ Management and Operation of Institutional Care Facilities</li> <li>★ Juvenile Delinquencies</li> <li>★ Juvenile Justice etc.</li> </ul>

<b>DELHI/07/ NGO/24</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Kasturba Gandhi N.M.Trust	
Address for Communication	Kasturba Vidyalaya, P.O. and Village Bakhtawarpur, Delhi-36	
Telephone (with STD code)	011-27722891	
Fax	27722891	
Email ID	<a href="mailto:kgnmtdelhi@yahoo.com">kgnmtdelhi@yahoo.com</a>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Mrs. Shila Barun, 9810652310	
Vision of NGO	Upliftment of Women and Children of rural areas.	
Mission of NGO	-	
Key Objectives	To inspire the womenfolk to know about their rights and responsibilities and also make them aware of value of health, hygiene and education.	
Major Activities	Creches, Balwadis, Vocational Training Programmes and Children Home.	
Target group/ Stakeholders	Children and Women	
Geographical location/area	Situated in North West of Delhi and in Alipore Block	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1945	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under M.P. Public Trust Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
08 January, 1964	Q/R-1/64	Indore M.P.
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	06330007	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No. DWCD/CW/CH/46/2009/10 U/S 34 of JJ 2000 read with Rule T0+T1 of JJ Rules 2006	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	12	
Physical Assets of the Organization	6.5 Crores land out of which 2 crore	

					built in area and 4.5 for dairy and agriculture, park etc.
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization					39
Total No. of Professional Staff					
a) Male					4
b) Female					35
Total number of					
a) Full Time					39
b) Part time Staff					-
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
26		23		37	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
		8.61 lakhs		5.58 lakhs	Dairy+ Agriculture 4.34 lakhs Trust's Contribution 6.34 lakhs
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level					Annual Report, Brochure, Leaflet and Audit Report
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside					No
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>					
Contact Details					
a) Name of Superintendent/Secretary					
b) Address					
c) Phone					
d) Fax					
e) Email					
<b>Type of Institution</b>					
Run by					
Year of Establishment of the Home					
Supported by					
<b>Whether registered under 34(3) of JJ Act with the State Government</b>					
Number of inmates					
a) Capacity					
b) Present Strength					
Number of Children lodged in the home having families residing in the same State/UT					
Reasons for staying in the home in case of children having families (provide details)					

Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	-		
c)	10-15 years	-	-		
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-		
b)	4-6 month	-	-		
c)	6-12 month	-	-		
d)	1-2 years	-	-		
e)	2-3 years	-	-		
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home					
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960					
Any other registration					
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board				
b)	Child Welfare Committee				
If Yes, Please Specify the Facilities provided					
INFRASTRUCTURE					
Infrastructure available					
a)	Owned				
b)	Rented				
c)	Lease				
d)	Donated				
Details of Accommodation for Children and Institutional Infrastructure					
S.No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories				
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen			-	-

e)	Dinning Hall			-	-
f)	Recreation room			-	-
g)	Library			-	-
h)	Counseling & Guidance room			-	-
i)	Office rooms			-	-
j)	Workshops			-	-
k)	Separate Bathrooms for boys and girls			-	-
l)	Separate Latrines for boys and girls			-	-
m)	Store room			-	-
n)	Play Ground			-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager					
b)	Social Welfare Officer					
c)	Counselor					
d)	Case Worker					
e)	Doctor (Part time or Full time)					
f)	Paramedical Staff					
g)	Educator					
h)	Vocational Instructor					
i)	Store-keeper cum Accountant					
j)	Music Teacher					
k)	Sports/ Yoga Teacher					
l)	Driver					
m)	Cook					
n)	House Aunty					
o)	Security Guard					
p)	Helper					
q)	Sweeper					
r)	Any other (Please Specify)					
	Total					

<b>CRITERIA FOR ADMISSION IN SHELTER HOMES</b>		
Whether the organization is following any criteria for admission of children in Homes		
If Yes Please mention		
Whether the organization maintains any specific Proforma for recording details of Information of every child		
If Yes, what kind of information you have collected from children		
Maintenance of Registers/Record Maintenance		
S.No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	
b)	Individual Care Plan	
c)	Supervision register	
d)	Medical file or medical report	
e)	Nutrition diet file	
f)	Stock Register	
g)	Visitor's book	
h)	Case file	
i)	Inquiry report file	
j)	Stock register	
k)	Any other(Please Specify)	
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		
Does the home have a Medical Care Unit for health check-up of Children		
If yes, Opening of day, time and duration of MCU		
Frequency of Doctor's visit		
Whether any trained Staff for first-aid		
Referral of Cases		
a)	Govt. Hospital	
b)	Dispensary	
c)	Any other	
How many children are suffering from communicable diseases and HIV/AIDS		
Any specialized services are provided for them		
If yes, Please provide in details		
Whether ambulance facility is available for patients		
Any other Facilities		
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		
How many times meals are provided in a day		
What types of special diet is provided for sick infant or children		
How many cooks are there		
Whether children are helping at the time of cooking in any way		
Whether any Nutrition and Child Development Officer is there		

<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing						
b)	Winter Clothing(Jersey)						
c)	School Uniform						
d)	Under garments						
e)	Towel						
f)	Durry						
g)	Blanket						
h)	Pillow						
i)	Shoes/Chappal						
j)	Tooth powder/paste						
k)	Soap						
l)	Oil						
m)	Utensils (Plate and Glass)						
<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
a)	Formal School on Premises	Yes			No		
b)	Pre-school						
c)	Primary						
d)	Secondary						
e)	Higher						
f)	Non-formal classes						
g)	Private coaching						
h)	Bridge Course						
i)	Any other						
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-		
b)	Primary	-	-	-	-		
c)	Secondary	-	-	-	-		
d)	Higher	-	-	-	-	-	
e)	Non-formal classes	-	-	-	-	-	
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students							
If Yes, then how much per child month							
Whether the educational facilities are adequate foe children							
If No, what are the other facilities required							
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children					Yes		
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		



		Boys	Girls	Total	
a)	Cutting and tailoring				
b)	Beauty Culture				
c)	Computer				
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing				
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				
k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				
Whether instructors are trained					
If Yes, details of qualification					
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					
Difficulty (if any)					
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games				
b)	Outdoor games				
c)	Music				
d)	Television				
e)	Picnic				
f)	Outings				
g)	Cultural Programme				
h)	Yoga				
i)	Debates				
j)	Radio				
k)	Any Other				
<b>LIBRARY</b>					
Whether library facilities are available or not					
If Yes, Opening timing or day					
What types of books provide for Children					
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water				

b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	
c)	Proper drainage System	
d)	Arrangements for disposal of garbage	
e)	Protection from mosquitoes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	
h)	Sufficient space for washing	
i)	Clean and fly-proof kitchen	
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		
What types of Co-operation and Co-ordination received for homes		
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		
Whether any specific evaluation of the Organization/Institution has been conducted in the past		
If Yes, when and by whom		
Whether CWC members visit your institution regularly		
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		
If Yes,		
a) Number of Training Programmes organized		
b) Details of Training Programmes		
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		
If Yes, Please specify		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★
Suggestion of CWC/Inspection Committee		★
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★

<b>DELHI/08/ NGO/25</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Don Bosco Ashalayam	
Address for Communication	Shelter Home in Okhla, Jamia Nagar, New Delhi-25	
Telephone (with STD code)	011-65100468	
Fax	011-25075227,25080097	
Email ID	dbasha.org@rediffmail.com	
Website of Organization	<a href="http://www.dbasha.org">www.dbasha.org</a>	
Type of Child Care Institution being run	Children Home and Shelter Home/ Drop-in-Centre	
Whether run by	NGO	
Name and contact of Chief Functionary	Fr. George Nadackal, Executive Director, Don Bosco Ashalayam, Old Najafgarh, Palam Gaon, New Delhi-45	
Vision of NGO	Building the dreams and shaping the lives of young at risk for a just and humane society	
Mission of NGO	Empower the young at risk to be agents of personal and social transformation through participatory approach	
Key Objectives	<p>→ Improve socio-medical support to both the institutionalized children of the shelter home and the non-institutionalized children who and work in the street</p> <p>→ Ensure Socio-Economic Rehabilitation of the Children 'on the street' and 'off the street'</p>	
Major Activities	<p>→ To run Children Home/ Shelter Home</p> <p>→ Non-Formal Education</p> <p>→ Childline</p> <p>→ Job Placement</p> <p>→ Research and Development Center</p> <p>→ Bosco Self Reliance Programme</p>	
Target group/ Stakeholders	Children and Adolescent	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	26 <sup>th</sup> July, 1980	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Society Registration Act, XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>

26 <sup>th</sup> July 1980	S/11094 of 1980	Delhi			
Whether the organization is registered under FCRA		Yes			
If Yes, FCRA No,		231650195			
Any other Registration/ Recognition with Central / State Govt.:		Registered u/s 34(3) & 37 of JJ Act, 2000			
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006		Yes			
If Yes, give details of registration		Registered u/s 34(3) & 37 of JJ Act, 2000 read with Rule 30(2) & 70 of JJ Rules, 2006 as Children Home/ Shelter Home			
If No, give reasons thereof		-			
Number of Governing Body Members		7			
Physical Assets of the Organization		Own Building and Furniture			
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization		8			
Total No. of Professional Staff					
a) Male		1			
b) Female		1			
Total number of					
a) Full Time		6			
b) Part time Staff		2			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
13,84,154		16,68,954		6,26,652	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
√	√	√	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Don Bosco Shelter Home for boys in Okhla. New Delhi		
Contact Details					
a) Name of Superintendent/Secretary			Sh Babloo Kumar (Home in Charge)		
b) Address			Don Bosco Shelter Home for boys in Okhla, Jamia Nagar, New Delhi-25		
c) Phone			011-65100468		
d) Fax			011-25075227,25080097		
e) Email			dbasha.org@rediffmail.com		
<b>Type of Institution</b>			<b>Children Home and Shelter Home</b>		

Run by		NGO (Don Bosco Ashalyam)		
Year of Establishment of the Home		2008		
Supported by		MWCD and State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		25		
b) Present Strength		18		
Number of Children lodged in the home having families residing in the same State/UT		3		
Reasons for staying in the home in case of children having families (provide details)		The Children belong to deprived and marginalized section		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	4	4
b)	5-10 years	-	9	9
c)	10-15 years	-	5	5
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	14	14
b)	4-6 month	-	4	4
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	1	1
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-
What are the facilities and support services provided for the children staying in Home		They have being looking after with Special Care Regular Medical Health Checks up		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960		No		
Any other registration		Societies Registration Act 1860 & Registered u/s 34(3)		
Whether the Institution is certified as Fit Institution by		Yes		
a)	Juvenile Justice Board	-		
b)	Child Welfare Committee	√		

If Yes, Please Specify the Facilities provided				Food, Lodging, Education, Counseling, Support Service, Restoration		
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	1	30.6 * 40.6	-	-	
b)	Classrooms	2	10 * 16	-	-	
c)	Sick room/ First Aid Room	1	10 * 16	-	-	
d)	Kitchen	1	18 * 13	-	-	
e)	Dinning Hall	-	-	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	1	20 * 10	-	-	
h)	Counseling & Guidance room	-	-	-	-	
i)	Office rooms	1	10 * 16	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	7	22 * 16	-	-	
l)	Separate Latrines for boys and girls	6	22 * 16	-	-	
m)	Store room	1	5 * 6	-	-	
n)	Play Ground	1	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				2854.5		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/ Year)
a)	Superintendent/ Project Manager	-	1	M.A.	8,000	-
b)	Social Welfare Officer	-	1	Graduation	5,000	-
c)	Counselor	-	-	--	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	1	Diploma in	8,000	-

				Nursing		
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	1	M.A.	4,000	-
k)	Sports/ Yoga Teacher	-	1	12 <sup>th</sup>	6,000	-
l)	Driver	-	-	-	-	-
m)	Cook	-	1	12 <sup>th</sup>	5,000	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other Incharge	-	1	Graduation	6,500	-
	Asst. Incharge	-	1	12 <sup>th</sup>	7,600	-
	Total	-	8	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Children are received by the order of Child Welfare Committee
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Parents Information and Reason for runaway from Home etc

#### Maintenance of Registers/Record Maintenance

S.No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	$\checkmark$
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	$\checkmark$
j)	Stock register	$\checkmark$
k)	Any other(Please Specify) : Children's Attendance Register, Staff Register/ Telephone Outgoing	$\checkmark$

#### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Regular Medical Check-up by Doctor and Staff Nurse Approaching Hospitals if needed
Does the home have a Medical Care Unit for health check-up of Children	No

If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Monthly-Doctor/Weekly- Staff Nurse/ Regular- If needed	
Whether any trained Staff for first-aid		Yes	
<b>Referral of Cases</b>			
a)	Govt. Hospital	√	
b)	Dispensary	√	
c)	Any other: Private Hospital	√	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		N.A.	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		Vehicle is available	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As prescribed by Doctor	
How many cooks are there		1	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Blanket	-	-
h)	Pillow	-	-
i)	Shoes/Chappal	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			
a)	Formal School on Premises	Yes	No
b)	Pre-school	-	√
c)	Primary	-	√
d)	Secondary	-	√
e)	Higher	-	√



f)	Non-formal classes	√	-
g)	Private coaching	-	√
h)	Bridge Course	-	√
i)	Any other	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-		
b)	Primary	-	-	-	-		
g)	Secondary	-	-	-	-		
h)	Higher	-	-	-	-	-	
i)	Non-formal classes	-	-	-	-	-	
j)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students

No

If Yes, then how much per child month

N.A.

Whether the educational facilities are adequate for children

No

If No, what are the other facilities required

Formal Education,  
Vocational Training

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children

Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring				
b)	Beauty Culture				
c)	Computer				
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing	1	-	1	6 Months
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				
k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				

Whether instructors are trained

Yes

If Yes, details of qualification

ITI/Diploma

Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course

Yes

Difficulty (if any)

-

### RECREATIONAL FACILITIES

Whether recreational facilities are available

Yes

If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	-
b)	Outdoor games	√	-
c)	Music	√	-
d)	Television	√	-
e)	Picnic	√	-
f)	Outings	√	-
g)	Cultural Programme	√	-
h)	Yoga	-	-
i)	Debates	√	-
j)	Radio	-	-
k)	Any Other	√	-
LIBRARY			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		24 * 7	
What types of books provide for Children		Moral Books, Educational Books, Pictographic Books and Recreational Books etc.	
SANITATION AND HYGIENE			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	-	
CO-ORDINATION AND COLLABORATION			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What types of Co-operation and Co-ordination received for homes		For Grant-in-aid, License Training, Advocacy, Resources, Education, Medical Facilities, Rehabilitation, Restoration etc.	
MONITORING AND EVALUATION			
Mechanism used by the Institution to monitor the activities of homes		In House Arrangement for monitoring by the authorized persons, Regular Supervision and Visits	
Whether any specific evaluation of the Organization/Institution has		Yes	

been conducted in the past	
If Yes, when and by whom	CWC and Dist. Officer (Social Welfare Department)
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	Yes
If Yes, a) Number of Training Programmes organized	1
b) Details of Training Programmes	NICP (National Initiative for Child Protection) Workshop which was conducted by Don Bosco Ashalayam (CHILDLINE) on 20-01-2011 covering the JJ Act and Child Rights etc
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Organised by the Organisation SAMARTH on Detoxication on 22,23,24 February 2011 at ISI Delhi
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ MWCD</li> <li>★ DWCD</li> <li>★ Police</li> <li>★ Education, Labour and Health Department</li> <li>★ Social Welfare Department</li> <li>★ CWC</li> </ul>
Suggestion of CWC/Inspection Committee	★ They have suggested keeping Toilets and Bathrooms more clean and quality of pulse should be improved
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ JJ Act</li> <li>★ Child Rights</li> <li>★ Detoxication</li> <li>★ Counseling</li> <li>★ Child labour and Trafficking</li> <li>★ Mechanism for Rehabilitation</li> </ul>

<b>DELHI/09/ NGO/26</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Samarpan Foundation	
Address for Communication	63, Jor Bagh, New Delhi 110003	
Telephone (with STD code)	9810012062	
Fax	-	
Email ID	samarpan@live.in	
Website of Organization	www.samarpanfoundation.org	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Shradha Ved Brat 9810012062	
Vision of NGO	To expand the Samarpan Foundation network globally and to offer assistance where there is a humanitarian, ecological or environmental need	
Mission of NGO	Rural and Urban Development	
Key Objectives	Rural and Urban Development	
Major Activities	Education, Homes, Food distribution, Health Care and Disaster	
Target group/ Stakeholders	Children	
Geographical location/area	B-24, Maharani Bagh, New Delhi-65	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	15 <sup>th</sup> September 2006	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
15-09-2006	3,723	New Delhi
Whether the organization is registered under FCRA	Applied	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	No	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	3	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	20	
Total No. of Professional Staff		
a) Male	5	
b) Female	15	
Total number of		
a) Full Time	10	
b) Part time Staff	10	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
97,80,092		54,12,974		12,31,610	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Samarpan Home	
Contact Details					
a) Name of Superintendent/Secretary				Shobha Lohia	
b) Address				A-212, New Friend Colony, New Delhi	
c) Phone				9810298944	
d) Fax				-	
e) Email				ajaysatsangi@gmail.com	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO (Samarpan Foundation)	
Year of Establishment of the Home				2009	
Supported by				Self members	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				17	
b) Present Strength				11	
Number of Children lodged in the home having families residing in the same State/UT				6	
Reasons for staying in the home in case of children having families (provide details)				Broken Homes, Abused Children, Financial Abandoned	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	6	3	9	
c)	10-15 years	1	1	2	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	3	1	4	
b)	4-6 month	1	2	3	
c)	6-12 month	1	-	1	

d)	1-2 years	2	1	3	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	1	1	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Food, Hygiene, Clothing etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by			Yes		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Education, Food, Hygiene, Clothing etc		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	-			
c)	Lease	-			
d)	Donated	√			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	110	-	-
e)	Dinning Hall	1	325	-	-
f)	Recreation room	1	11	-	-
g)	Library	1	122	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-

o)	.Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				3060	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1	Post Graduate	-	-
b)	Social Welfare Officer	-	2	Post Graduate	-	-
c)	Counselor	-	1	Post Graduate	-	-
d)	Case Worker	-	3	Post Graduate	-	-
e)	Doctor (Part time or Full time)	-	1	Post Graduate	-	-
f)	Paramedical Staff	-	1	Post Graduate	-	-
g)	Educator	-	2	Post Graduate	-	-
h)	Vocational Instructor	-	1	Graduate	-	-
i)	Store-keeper cum Accountant	-	1	Graduate	-	-
j)	Music Teacher	-	1	Graduate	-	-
k)	Sports/ Yoga Teacher	-	1	Graduate	-	-
l)	Driver	-	1	12 <sup>th</sup>	7,000	-
m)	Cook	-	1	12 <sup>th</sup>	5,000	-
n)	House Aunty	-	-	12 <sup>th</sup>	-	-
o)	Security Guard	-	2	12 <sup>th</sup>	4,500	-
p)	Helper	-	3	12 <sup>th</sup>	3,500	-
q)	Sweeper	-	1	12 <sup>th</sup>	3,000	-
r)	Any other	-	-	-	-	-
Total		-	23	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	No
If Yes Please mention	N.A.
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Their Background Details and difficulties faced by them

#### Maintenance of Registers/Record Maintenance

S.No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	$\checkmark$
d)	Medical file or medical report	$\checkmark$

e)	Nutrition diet file		√
f)	Stock Register		√
g)	Visitor's book		√
h)	Case file		√
i)	Inquiry report file		√
j)	Stock register		√
k)	Any other(Please Specify) :		-
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	√	
c)	Any other:	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		No	
If yes, Please provide in details		N.A.	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As prescribed by Doctor	
How many cooks are there		1	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	10	Yearly
b)	Winter Clothing(Jersey)	6	Yearly
c)	School Uniform	3	Yearly
d)	Under garments	6	Yearly
e)	Towel	3	Yearly
f)	Durry	2	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	3	Yearly



j)	Tooth powder/paste	1	Monthly
k)	Soap	2	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	4	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	√
c)	Primary	-	√
d)	Secondary	-	√
e)	Higher	-	√
f)	Non-formal classes	√	-
g)	Private coaching	√	-
h)	Bridge Course	-	√
i)	Any other: Clay Dance	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	9	4	5	Private	2 km	By Car
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month N.A.

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-

l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				N.A.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Weekly	
e)	Picnic	√		Monthly	
f)	Outings	√		Weekly	
g)	Cultural Programme	√		Monthly	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other: Clay Dance	√		Weekly	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Any Time	
What types of books provide for Children				Moral Books, Educational Books etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other				No	

Govt., NGOs etc	
What types of Co-operation and Co-ordination received for homes	N.A.
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	Supervision by Volunteers and Members
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	By Madhvi Ganeri on 02-02-2011
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	No Response
Suggestion of CWC/Inspection Committee	★ They have suggested keeping Toilets and Bathrooms more clean and quality of pulse should be improved
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	★ Psychology ★ Abused Children

<b>DELHI/10/ NGO/27</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Sewa Bharti Matrichhaya	
Address for Communication	B-2/2, Mianwali Nagar, Near Peeragarhi Chowk, New Delhi 110087	
Telephone (with STD code)	011-25286821, 45088544	
Fax	-	
Email ID	<a href="mailto:mianwalimatrichhaya@rediffmail.com">mianwalimatrichhaya@rediffmail.com</a>	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Mr. D.K. Manchanda Organising Secretary	
Vision of NGO	A Caring Home for every child	
Mission of NGO	To find a loving home for the abandoned child	
Key Objectives	To facilitate a link between childless couple and abandoned children	
Major Activities	To provide care and protection to abandoned children	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	05-01-2001	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under JJ Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
-	-	-
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	231650568	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	24	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	18	
Total No. of Professional Staff		
a) Male	1	
b) Female	1	
Total number of		
a) Full Time	12	

b) Part time Staff					6	
<b>FINANCIAL MANAGEMENT</b>						
Annual Budget of Organization for last three years (In Lakhs)						
2009-10		2008-09			2007-08	
25		16			20	
Sources of Funding of the NGO (Cash/kind/other)						
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Bank Interest	
-	-	-	-	√	√	
<b>DOCUMENTATION</b>						
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>						
<b>Name of Child Care Institution</b>				Sewa Bharti Matrichhaya		
Contact Details						
a) Name of Superintendent/Secretary				Mr. D.K. Manchanda		
b) Address				E-34, New Multan Nagar, Delhi		
c) Phone				011-25286821, 45088544		
d) Fax				-		
e) Email				mianwalimatrichhaya@rediffmail.com		
<b>Type of Institution</b>				<b>Children Home</b>		
Run by				NGO (Sewa Bharti Matri Chhaya)		
Year of Establishment of the Home				2002		
Supported by				Donation		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>		
Number of inmates						
a) Capacity				25		
b) Present Strength				10		
Number of Children lodged in the home having families residing in the same State/UT				Nil		
Reasons for staying in the home in case of children having families (provide details)				N.A.		
Age breakup of children						
S.No.	Age	Number of Children		Total		
		Girls	Boys			
a)	0-5 years	-	-	-		
b)	5-10 years	-	-	-		
c)	10-15 years	6	4	10		
d)	15-18 years	-	-	-		
Details of Stay of Children in the home						
S.No.	Duration	Number of Children		Total		
		Girls	Boys			
a)	0-4 month	4	1	5		

b)	4-6 month	1	-	1
c)	6-12 month	-	-	-
d)	1-2 years	-	2	2
e)	2-3 years	1	-	1
f)	3-4 years	-	-	-
g)	4-5 years	-	1	1
h)	More than 5 Years	-	-	-

Number of “Children with special needs” in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	1	2	3
b)	Autism	-	-	-
c)	Physically challenged	-	1	1
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home -

Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960 Yes

Any other registration CARA/CVARA, Registration of Sewa Bharti Matrichhaya

Whether the Institution is certified as Fit Institution by Yes

a) Juvenile Justice Board -

b) Child Welfare Committee ✓

If Yes, Please Specify the Facilities provided -

**INFRASTRUCTURE**

Infrastructure available

a) Owned -

b) Rented -

c) Lease -

d) Donated ✓

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys	-	-	-	-

	and girls				
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)

-

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light

Yes

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	-	-	-
b)	Social Welfare Officer	1	1	-	-	-
c)	Counselor	1	1	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	4	4	-	-	-
f)	Paramedical Staff	1	1	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	-	-
n)	House Aunty	6	6	-	-	-
o)	Security Guard	1	1	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other	-	-	-	-	-
	Total	18	18	-	-	-

### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	No
If Yes Please mention	N.A.
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

Maintenance of Registers/Record Maintenance

S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>

b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify) :	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	24 hours
Frequency of Doctor's visit	Daily
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	-
b) Dispensary	-
c) Any other: Private Hospital	√
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Any specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	N.A.

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	As prescribed by Doctor
How many cooks are there	1
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	5	-
b)	Winter Clothing(Jersey)	3	-
c)	School Uniform	-	-
d)	Under garments	10	-
e)	Towel	3	-
f)	Durry	2	-



g)	Blanket	2	-
h)	Pillow	2	-
i)	Shoes/Chappal	-	-
j)	Tooth powder/paste	-	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other: Clay Dance	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month N.A.

Whether the educational facilities are adequate for children No

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-

i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				N.A.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				N.A.	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	-	-	-	-
b)	Outdoor games	-	-	-	-
c)	Music	-	-	-	-
d)	Television	-	-	-	-
e)	Picnic	-	-	-	-
f)	Outings	-	-	-	-
g)	Cultural Programme	-	-	-	-
h)	Yoga	-	-	-	-
i)	Debates	-	-	-	-
j)	Radio	-	-	-	-
k)	Any Other: Clay Dance	-	-	-	-
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		N.A.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		CCTV
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Monthly Inspection & Review is done by Management Committee
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Sewa Bharti Matri chhayya held by CARA & Meeting with CVARA
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ CARA ★ CVARA ★ DWCD ★ CWC
Suggestion of CWC/Inspection Committee		No Response
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

<b>DELHI/11/ NGO/28</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Bachchon Ka Ghar	
Address for Communication	5028, Bachchon ka Ghar, Dariya GAnj, New Delhi-02	
Telephone (with STD code)	011-23278795	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Tejlal Bharti	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	9 <sup>th</sup> December, 1966	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
09-12-1966	S-3155	Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	231650112	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	-	
Number of Governing Body Members	9	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	-	
Total No. of Professional Staff		
a) Male	16	
b) Female	5	
Total number of		
a) Full Time	19	
b) Part time Staff	2	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		

2009-10		2008-09		2007-08	
6		5		5	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Bachchon Ka Ghar	
Contact Details					
a) Name of Superintendent/Secretary				Haji Mian Fayyazadd u	
b) Address				HAji Hotel, JAma Masjid	
c) Phone				011-23266478	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO	
Year of Establishment of the Home				1891	
Supported by				MWCD	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				230	
b) Present Strength				189	
Number of Children lodged in the home having families residing in the same State/UT				Nil	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	30	50	80	
c)	10-15 years	20	35	55	
d)	15-18 years	24	30	54	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	2	-	2	
b)	4-6 month	-	1	1	
c)	6-12 month	21	10	31	
d)	1-2 years	10	15	25	
e)	2-3 years	12	25	37	

f)	3-4 years	6	20	26	
g)	4-5 years	6	25	31	
h)	More than 5 Years	17	19	36	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			N.A.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			N.A.		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	40
b)	Classrooms	-	-	-	40
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	2	-	-	-
e)	Dinning Hall	2	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-
h)	Counseling & Guidance room	1	-	-	-
i)	Office rooms	4	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	7 5	-	-	-
l)	Separate Latrines for boys and girls	10 7	-	-	-
m)	Store room	2	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	1	-	-	-
Total area of the Campus (Sq. ft.)			-		

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					-	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	4	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	3	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	1	-	-	-	-
p)	Helper	1	-	-	-	-
q)	Sweeper	2	-	-	-	-
r)	Any other : Peon	3	-	-	-	-
	Total	16	-	-	-	-
<b>CRITERIA FOR ADMISSION IN SHELTER HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Only for Orphan Boys and Girls	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					Father Death Certificate, Birth Certificate of Child, I.D. Proof of Guardian, Economic Conditions, Photograph of child and guardian	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register			Please tick $\checkmark$		
a)	Admission and discharge register			$\checkmark$		
b)	Individual Care Plan			-		
c)	Supervision register			-		

d)	Medical file or medical report	√
e)	Nutrition diet file	-
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify) :	-

### Minimum Standard of Care

#### **MEDICAL CARE**

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	Daily, 5:00 p.m. to 6:00 p.m.
Frequency of Doctor's visit	Daily
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	√
c) Any other:	-
How many children are suffering from communicable diseases and HIV/AIDS	No
Any specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	N.A.

#### **NUTRITION AND DIET SCALE**

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three
What types of special diet is provided for sick infant or children	As prescribed by Doctor
How many cooks are there	Three
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### **CLOTHING AND BEDDING**

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	4	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	1	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly



i)	Shoes/Chappal	1	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	-	-
f)	Non-formal classes	√	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other: Clay Dance	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	63	27	36	-	-	Walk
c)	Secondary	52	16	36	-	-	Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	48	46	2	-	-	Walk
f)	Any other	26	26	-	-	-	Walk

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month 50 /-

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	35	35	1 Year
b)	Beauty Culture	-	-	-	-
c)	Computer	5	3	8	6 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-

k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				N.A.	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other: Clay Dance	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				8:0 a.m. to 8:00 p.m.	
What types of books provide for Children				Story, Newspapers, comic etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	No
What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
<b>DEPARTMENTAL COOPERATION</b>	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	No Response
Suggestion of CWC/Inspection Committee	★ Facility Sufficient for children, Record are properly maintained
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	No Response

<b>DELHI/12/ NGO/29</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Believers Church India	
Address for Communication	M-4, Hauz-Khas, New Delhi	
Telephone (with STD code)	011-26848565	
Fax	011-26854891	
Email ID	<a href="mailto:Info.delhi@bcasia.org">Info.delhi@bcasia.org</a>	
Website of Organization	<a href="http://www.gospelforasia.org">www.gospelforasia.org</a>	
Type of Child Care Institution being run	Children Home and Shelter Home/ Drop-in-Centre	
Whether run by	NGO	
Name and contact of Chief Functionary	Bishop Simon John	
Vision of NGO	To create an environment for holistic development of children on streets, making them aware of themselves with relation to the world and their problems	
Mission of NGO	To cater to the needs of the children on the streets who are homeless, destitute and abused	
Key Objectives	To help children to become aware of his/her own condition and to help them to come out of it	
Major Activities	Focused Interventions, Capacity Building for Believers Church Children's Home, Promotion of Children's Participation, Advocacy and Lobbying	
Target group/ Stakeholders	Children	
Geographical location/area	Sec-8, Dwarka	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1 <sup>st</sup> July, 2007	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	JJ Act,2000	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
01-06-2009	DWC/CWC/CH/35/2009	Delhi
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	-	
Physical Assets of the Organization	No	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	19	

Total No. of Professional Staff					
a) Male		-			
b) Female		-			
Total number of					
a) Full Time		12			
b) Part time Staff		7			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
-		-		-	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Believers Church Children Home	
Contact Details					
a) Name of Superintendent/Secretary				Fr. Daniel Vaghase	
b) Address				M-4, Hauz-Khas, New Delhi	
c) Phone				011-26848565	
d) Fax				011-26854891	
e) Email				denielv@bcasia.org	
<b>Type of Institution</b>				<b>Shelter Home</b>	
Run by				NGO (Believers Church India)	
Year of Establishment of the Home				2007	
Supported by				-	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				30	
b) Present Strength				14	
Number of Children lodged in the home having families residing in the same State/UT				Nil	
Reasons for staying in the home in case of children having families (provide details)				Runaway Children from Homes, Missing and Child Labour	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	4	4	
c)	10-15 years	-	10	10	
d)	15-18 years	-	-	-	

Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	1	1	
b)	4-6 month	-	1	1	
c)	6-12 month	-	1	1	
d)	1-2 years	-	8	8	
e)	2-3 years	-	1	1	
f)	3-4 years	-	1	1	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Food, Clothing, Vocational Training		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
INFRASTRUCTURE					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	2	13.5,13.3	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	14.8	-	-
e)	Dinning Hall	1	27.3	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	13.2	-	-
j)	Workshops	-	-	-	-

k)	Separate Bathrooms for boys and girls	1	8	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	1	10.5	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				-	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1	B.D. B.A.	8,500	-
b)	Social Welfare Officer	-	1	B. Th	3,500	-
c)	Counselor	-	2	12 <sup>th</sup>	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	2	M.B.B.S.	-	-
f)	Paramedical Staff	-	2	B.Sc. Nursing	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	1	12 <sup>th</sup>	5,750	-
i)	Store-keeper cum Accountant	-	1	B.Com. B.C.A	7,500	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	1	-	4,500	-
n)	House Aunty/ Care Taker	-	4	12 <sup>th</sup>	4,500	-
o)	Security Guard	-	2	B.A.	5,000	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other : General Administration	-	1	P.D.C.	13,00-0	-
	Health Instructor	-	1	Staff Nurse		
	Total	-	19	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of	Yes
---	-----

children in Homes		
If Yes Please mention		C.W.C Project BCCH
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Family Background and Personal Case.
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	$\checkmark$
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	$\checkmark$
j)	Stock register	$\checkmark$
k)	Any other(Please Specify) :	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Govt. and Private Hospital
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		Morning and Evening.
Frequency of Doctor's visit		Daily
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	$\checkmark$
b)	Dispensary	$\checkmark$
c)	Any other:	-
How many children are suffering from communicable diseases and HIV/AIDS		No
Any specialized services are provided for them		-
If yes, Please provide in details		-
Whether ambulance facility is available for patients		Yes
Any other Facilities		-
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Three
What types of special diet is provided for sick infant or children		As prescribed by Doctor
How many cooks are there		One
Whether children are helping at the time of cooking in any way		No
Whether any Nutrition and Child Development Officer is there		Yes
<b>CLOTHING AND BEDDING</b>		
How many sets of clothes, bedding and other articles are given to children		



S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	4	Yearly
e)	Towel	2	Yearly
f)	Durry	1	Yearly
g)	Blanket	2	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	2	Yearly
j)	Tooth powder/paste	2	Monthly
k)	Soap	2	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	√
c)	Primary	√	-
d)	Secondary	-	√
e)	Higher	-	√
f)	Non-formal classes	√	-
g)	Private coaching	-	√
h)	Bridge Course	-	√
i)	Any other: Clay Dance	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	9	9	-	Govt.	1 km	Walk
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-

b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	9	-	9	1 Year
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	√		Weekly	
c)	Music	√		Daily	
d)	Television	√		Weekly	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Monthly	
h)	Yoga	-		-	
i)	Debates	√		Yearly	
j)	Radio	-		-	
k)	Any Other: Clay Dance	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Monday to Friday	
What types of books provide for Children				General Knowledge, Planets Stories, Children Magazines etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes,			Yes	

	maintenance & cleanliness of the premises	
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Transfer of Children
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		<ul style="list-style-type: none"> <li>★ Don Bosco Ashalayam, Old Najafgarh</li> <li>★ Mamta Child Care Centre, C/O Children of the World</li> <li>★ Prayas Shelter, Home for Girls</li> <li>★ Udayan Care</li> <li>★ Antyodaya Niketan</li> </ul>
Suggestion of CWC/Inspection Committee		<ul style="list-style-type: none"> <li>★ Home need Washing Machine, Fire Extinguisher flies Repelled</li> </ul>
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		<ul style="list-style-type: none"> <li>★ Any Training Programme/ Workshops for the Staff</li> </ul>

*Gujarat*

<b>GJ/01/GO/30</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Observation Home cum Children Home- Junagadh</b>	
Contact Details				
a) Name of Superintendent/Secretary			Mr. A.K.Bhatt	
b) Address			M.G.Road, Hathikhana, Junagadh	
c) Phone			0285 2620157	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home and Observation Home (Boys)</b>	
Run by			State Government (Social and Justice Department of Gujarat)	
Year of Establishment of the Home			01-04-1961	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			24	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Economical Condition of Children's families and their circumstances	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	2	2
c)	10-15 years	-	20	20
d)	15-18 years	-	2	2
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	0	0
b)	4-6 month	-	1	1
c)	6-12 month	-	9	9
d)	1-2 years	-	7	7
e)	2-3 years	-	3	3
f)	3-4 years	-	1	1
g)	4-5 years	-	0	0
h)	More than 5 Years	-	3	3
Number of "Children with special needs" in the home				

S.No.	Category	Number of Children		Total		
		Girls	Boys			
a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			Education, Diet, Health, Sports and Entertainment			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No			
Any other registration			Nil			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	√				
b)	Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	6	-	25	24	
b)	Classrooms	1	-	25	24	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	1	-	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	8	-	-	-	
l)	Separate Latrines for boys and girls	8	-	-	-	
m)	Store room	1	-	-	-	
n)	Play Ground	1	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned	Actual	Educational	Salary /	Associated

		Strength	Strength	Qualification	Honorarium per month	with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.S.W.	5,000/-	31 <sup>st</sup> Dec. 2009
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.A. (Psychology)	4,500/-	16 <sup>th</sup> Sep. 2010
d)	Case Worker	1	1	M.S.W., M.A.	5,000/-	29 <sup>th</sup> June 2010
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	5,00/-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	1	1	M.A.	28,634/	16 <sup>th</sup> Jan.1995
i)	Store-keeper cum Accountant/ LDC	1	1	B.A.	4,500	9 <sup>th</sup> April 2011
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	1,500	-
n)	House Aunty	1	1	B.A.	16,920	10 <sup>th</sup> March 1995
o)	Security Guard	1	1	-	1,500/-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	-	1,500/-	-
r)	Any other	-	-	-	-	-
	Total	14	12	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		-
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		-
If Yes, what kind of information you have collected from children		-
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input type="checkbox"/>
c)	Supervision register	<input type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input type="checkbox"/>

g)	Visitor's book	-	
h)	Case file	√	
i)	Inquiry report file	-	
j)	Stock register	-	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Yes	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		N.A.	
Frequency of Doctor's visit		Once in a Weekly by Voluntary Medical Officer	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		Fruits and Nutrition food as per advice of Doctor	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	1	Every three Months
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	2	Yearly



j)	Tooth powder/paste	1	Monthly
k)	Soap	3	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	√	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	13	13	-	Govt.	1 km	-
c)	Secondary	11	11	-	Govt.	1 km	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month N.A.

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	24	-	24	1 Year
b)	Beauty Culture	-	-	-	-
c)	Computer	24	-	24	1 Year
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Daily	
i)	Debates	√		Weekly	
j)	Radio	-		-	
k)	Any Other (Please Specify)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				11:00 a.m. to 6:10 p.m.	
What types of books provide for Children				Stories, Educational, Novel, General Knowledge etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		-
What type of Co-operation and Co-ordination has been received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Yes
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Various enactments and Government Scheme for Probation Officer by Social Justice & Empowerment Department of Gujarat State
<b>DEPARTMENTAL COOPERATION</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>GJ/02/GO/31</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		<b>Observation Home cum Children Home- Palanapur</b>		
Contact Details				
a) Name of Superintendent/Secretary		Mr. M.K.Joshi		
b) Address		Staff quarters of observation home, Hanuman tekari, Palanapur, Dist: Banashkantha		
c) Phone		02742-253795		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Observation cum Children Home (Boys)</b>		
Run by		State Government		
Year of Establishment of the Home		1963		
Supported by		State Government		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		30		
b) Present Strength		10		
Number of Children lodged in the home having families residing in the same State/UT		Nil		
Reasons for staying in the home in case of children having families (provide details)		Nil		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	2	2
c)	10-15 years	-	8	8
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	2	2
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	8	8
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-

g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Clothing, Bedding, Education Facilities, Restoration and Rehabilitation		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			Nil		
Whether the Institution is certified as Fit Institution by			No		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	3000	-	-
b)	Classrooms	1	600	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	250	-	-
e)	Dinning Hall	1	800	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	1	-	-	-
i)	Office rooms	1	400	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	7	175	-	-
l)	Separate Latrines for boys and girls	7	175	-	-
m)	Store room	1	300	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)					1750	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/ Year)
a)	Superintendent/ Project Manager	1	1	M.A., B. Ed.	5,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S	500	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	2	1	-	3,500	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	5 <sup>th</sup>	15,000	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	3	3	H.S.C.	3,500	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	5 <sup>th</sup>	10 rs. Per hour	-
r)	Any other	-	-	-	-	-
Total		11	9	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					No	
If Yes Please mention					-	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					Home have maintained personal file of children	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register				<input checked="" type="checkbox"/>	
b)	Individual Care Plan				<input checked="" type="checkbox"/>	
c)	Supervision register				<input checked="" type="checkbox"/>	
d)	Medical file or medical report				<input checked="" type="checkbox"/>	

e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Visiting medical officer have taken visited every Tuesday and checked every child of home	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		No one	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		-	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As per visiting medical officer suggestion	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	3	Yearly
d)	Under garments	5	Yearly
e)	Towel	2	Yearly
f)	Durry	1	Every two year
g)	Blanket	1	Yearly

h)	Pillow	1	Yearly				
i)	Shoes/ Chappal	1	Yearly				
j)	Tooth powder/paste	100 gm	Monthly				
k)	Soap	1	Monthly				
l)	Oil	60 gm	Monthly				
m)	Utensils (Plate and Glass)	1	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.N	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	-	-				
c)	Secondary	-	-				
d)	Higher	-	-				
e)	Non-formal classes	-	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a) e	Pre-school	9	9	-	Govt.	100 m	By run
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A.	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						N.A.	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/	-	-	-	-		



	mobile repairing				
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				No	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	√		Four Month	
f)	Outings	-		-	
g)	Cultural Programme	√		Every Festival	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other (Please Specify)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	

h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What type of Co-operation and Co-ordination has been received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
<b>DEPARTMENTAL COORDINATION</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		CWC suggested that when any child admit with need care and protection home should inform committee immegetali and try to restoration for child
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>GJ/03/GO/32</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Observation Home cum Children Home- Mehsana</b>	
Contact Details				
a) Name of Superintendent/Secretary			Shri Hitesh R.Patel	
b) Address			Opp. Jay bhara Society, Radhapura Chara Rasta, Mehsana-384002	
c) Phone			02762-253298	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Observation cum Children Home (Boys)</b>	
Run by			State Govt. (Social Defense Department, Gujarat)	
Year of Establishment of the Home			1962	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			25	
b) Present Strength			3	
Number of Children lodged in the home having families residing in the same State/UT			2	
Reasons for staying in the home in case of children having families (provide details)			They have not given bail from JJB	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	1	1
d)	15-18 years	-	2	2
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	3	3
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home				N.A.	
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				No	
Any other registration				No	
Whether the Institution is certified as Fit Institution by				No	
c)	Juvenile Justice Board	√			
d)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided				Food, Residence, Clothing, Bedding, Education, Training, Rehabilitation	
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	207	-	-
b)	Classrooms	1	207	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	182	-	-
e)	Dinning Hall	1	207	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	1	207	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	3	48	-	-
l)	Separate Latrines for boys and girls	2	32	-	-
m)	Store room	1	207	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				20392.034 Sq. Ft	
Whether the dormitories, classrooms and workshops have sufficient				Yes	

ventilation and Light						
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.Com	5,000	31/12/2009
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher/Craft Teacher	2	1	T.C.W.C.G.	18,280	14/7/2008
k)	Sports/ Yoga Teacher	1	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	7 <sup>th</sup>	15,00	1/2/2009
n)	House Aunty	-	-	-	-	-
o)	Security Guard	3	2	4 <sup>th</sup> , 10 <sup>th</sup>	8,580/- & 3,500/-	28/1/2009 3/3/2010
p)	Helper	-	-	-	-	-
q)	Sweeper	1	-	-	-	-
r)	Any other	1	-	-	-	-
	Total	10	5	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Round up, Advertisement in daily newspaper, communication with other govt. department	
Whether the organization maintains any specific Proforma for recording details of Information of every child					No	
If Yes, what kind of information you have collected from children					Nil	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register				<input checked="" type="checkbox"/>	
b)	Individual Care Plan				<input checked="" type="checkbox"/>	

c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### **MEDICAL CARE**

What are the health related services available for Children	First Aid Kit
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	Nil
Frequency of Doctor's visit	Nil
Whether any trained Staff for first-aid	No
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Any specialized services are provided for such children	Yes
If yes, Please provide in details	Medical checkup in every three months
Whether ambulance facility is available for patients	No
Any other Facilities	Use Government 108 service for sick children

#### **NUTRITION AND DIET SCALE**

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	As per advice of doctor
How many cooks are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### **CLOTHING AND BEDDING**

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Per 2 year
b)	Winter Clothing(Jersey)	1	Per 2 year
c)	School Uniform	2	Per 2 year
d)	Under garments	2	Per year
e)	Towel	2	Per year

f)	Durry		2		Per year		
g)	Blanket		1		Per 2 year		
h)	Pillow		2		Per 5 year		
i)	Shoes/ Chappal		1		Per year		
j)	Tooth powder/paste		50 gm		Monthly		
k)	Soap		1		Monthly		
l)	Oil		60 gm		Monthly		
m)	Utensils (Plate and Glass)		1		Per 2 year		
<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes		No		
a)	Pre-school		-		√		
b)	Primary		-		√		
c)	Secondary		-		√		
d)	Higher		-		√		
e)	Non-formal classes		√		-		
f)	Private coaching		-		√		
g)	Bridge Course		-		√		
h)	Any other		-		√		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students					No		
If Yes, then how much per child month					Nil		
Whether the educational facilities are adequate for children					Yes		
If No, what are the other facilities required					Nil		
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	3	-	3	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				T.C.W.C.G.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				No	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Monthly	
g)	Cultural Programme	-		-	
h)	Yoga	√		Weekly	
i)	Debates	√		Weekly	
j)	Radio	-		-	
k)	Any Other (Please Specify)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				2:30 p.m. to 3:00 p.m.	
What types of books provide for Children				Social, Spiritual Books, Educational & Story Books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets			Yes	



	(at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		SSK (Serve Shiksha Abhiyan), for education, ITI for short term course, District legal service authority for free legal service
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		CWC, JJB, District Social Defense Officer, High Court of Gujarat and Directorate of Social Defense Department
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		District Court
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		→ Superintendent Participate in State Level Judicial Colloquium on Juvenile Justice Act, on October 23 <sup>rd</sup> & 24 <sup>th</sup> , 2011 making Justice and Protection a reality for Children in Gujarat → Superintendent Participate in training programme on JJ Act, organized by Directorate of Social Defense Department
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		→SSK (Serve Shiksha Abhiyan), ITI, District legal service authority, Civil Hospital
Suggestion of CWC/Inspection Committee		→ Advertising in newspaper & communicate with other department for admission of

	children
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	→Counseling Method for different type of children, Different training courses for children

<b>GJ/04/GO/33</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Juvenile Home For Boys Bharuch</b>	
Contact Details				
a) Name of Superintendent/Secretary			Sh. V.B. Chhatrivala	
b) Address			Juvenile Home For Boys Kukarvada Road, Bharuch, Gujarat	
c) Phone			(02642) 223669	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Govt. (Social Justice & Empowerment Department, Govt. of Gujarat)	
Year of Establishment of the Home			2 <sup>nd</sup> January 1957	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			150	
b) Present Strength			82	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Orphan, Parentless etc	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	39	39
d)	15-18 years	-	43	43
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	17	17
e)	2-3 years	-	18	18
f)	3-4 years	-	12	12
g)	4-5 years	-	29	29
h)	More than 5 Years	-	6	6

Number of “Children with special needs” in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify) Care and Protection	-	82	82	
What are the facilities and support services provided for the children staying in Home				As Under JJ Act 2006 & Govt. Rules for Children’s necessity Bellow mention	
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				No	
Any other registration				State Govt. Institution	
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board			√	
b)	Child Welfare Committee			√	
If Yes, Please Specify the Facilities provided				-	
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned			√	
b)	Rented			-	
c)	Lease			-	
d)	Donated			-	
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	-	-
b)	Classrooms	2	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	1	-	-	-
h)	Counselling & Guidance room	1	-	-	-
i)	Office rooms	2	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	10	-	-	-
l)	Separate Latrines for boys and girls	10	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				21651 Sq. Ft	
Whether the dormitories, classrooms and workshops have sufficient				Yes	

MANPOWER OF CHILDREN HOME						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.Com	9,300 - 34,800	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	1	-	-	-
d)	Case Worker	1	1	B.A.	5,000	-
e)	Doctor (Part time or Full time)	1	1	M.D.	-	-
f)	Paramedical Staff	1	1	Nursing	-	-
g)	Educator	3	1	P.T.C.	9,300 - 34,800	-
h)	Vocational Instructor	1	1	M.A. B.Ed.	3,500	-
i)	Store-keeper cum Accountant/ LDC	-	1	-	-	-
j)	Music Teacher/Craft Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	B.A.	2,500	-
m)	Cook	2	2	10 <sup>th</sup>	4,400- 7,400	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	4	4	-	4,400- 7,400	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	1	10 <sup>th</sup>	4,400- 7,400	-
r)	Any other : Clerk	1	1	10 <sup>th</sup>	9,300 – 4,400	-
	Watchman	2	2	10 <sup>th</sup>	4,400- 7,400	-
	Total	21	18	-	-	-
CRITERIA FOR ADMISSION IN CHILDREN HOMES						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Under of Juvenile Justice Act 2006 and Rules	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					As per JJ Act	
Maintenance of Registers/Record Maintenance						

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register	<input checked="" type="checkbox"/>	
b)	Individual Care Plan	<input checked="" type="checkbox"/>	
c)	Supervision register	<input checked="" type="checkbox"/>	
d)	Medical file or medical report	<input checked="" type="checkbox"/>	
e)	Nutrition diet file	<input checked="" type="checkbox"/>	
f)	Stock Register	<input checked="" type="checkbox"/>	
g)	Visitor's book	<input checked="" type="checkbox"/>	
h)	Case file	<input checked="" type="checkbox"/>	
i)	Inquiry report file	<input checked="" type="checkbox"/>	
j)	Stock register	<input checked="" type="checkbox"/>	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Part time Doctor and full time Nurse are available here	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		As per requirement and 9:00 a.m. to 4:00 p.m. regularly	
Frequency of Doctor's visit		Twice in a weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	<input checked="" type="checkbox"/>	
b)	Dispensary	<input checked="" type="checkbox"/>	
c)	Any other	<input checked="" type="checkbox"/>	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		Institutions have a city ride bus of 16 seated and 108 ambulance service 24 * 7 free of charge	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As per advice of doctor	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)

a)	Summer Clothing	4	Yearly				
b)	Winter Clothing(Jersey)	1	Yearly				
c)	School Uniform	2	Yearly				
d)	Under garments	4	Yearly				
e)	Towel	2	Yearly				
f)	Durry	1	2 Years				
g)	Blanket	1	4 Years				
h)	Pillow	1	10 Years				
i)	Shoes/ Chappal	2	Yearly				
j)	Tooth powder/paste	1	Monthly				
k)	Soap	1	Monthly				
l)	Oil	1	Monthly				
m)	Utensils (Plate and Glass)	1	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes	No				
a)	Pre-school	√	-				
b)	Primary	√	-				
c)	Secondary	√	-				
d)	Higher	√	-				
e)	Non-formal classes	√	-				
f)	Private coaching	√	-				
g)	Bridge Course	√	-				
h)	Any other: Computer Training	√	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	26	26	-	Private	3 km	By Bus
c)	Secondary	38	38	-	Private	3 km	By Bus
d)	Higher	13	13	-	Private	3 km	By Bus
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A.	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						N.A.	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		

b)	Beauty Culture	-	-	-	-
c)	Computer	13	-	13	Informal
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other: Agriculture	82	-	82	-
Whether instructors are trained				Yes	
If Yes, details of qualification				B.A. M.A. B. Ed. With Computer Operator cum Programming Assistant	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				No	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other (Please Specify)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				8:00 a.m. to 4:00 p.m.	
What types of books provide for Children				Social, Spiritual Books, As per children necessity	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	



a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		As per Children and Institute requirement
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Yes
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		By Director of Social Defense Department, Gujarat, Gandhinagar and Other Local Officer and honorable Court
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		-
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		→Social Justice and Empowerment of Government of India organizes of training programme for superintendent and other staff
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		→Narmada Channel, Nisharg Group and Other NGO
Suggestion of CWC/Inspection Committee		No Response
Mention Areas/issues on which the Staff/Members of your		No Response

Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	
---	--

<b>GJ/01/ NGO/34</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Mahipatram Rupram Ashram	
Address for Communication	O/S, Raipur Gate, A'BO-22	
Telephone (with STD code)	079-25454007	
Fax	079-25453761	
Email ID	<a href="mailto:mrashram@yahoo.com">mrashram@yahoo.com</a>	
Website of Organization	No	
Type of Child Care Institution being run	Children Home and Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Shri Vijay Pandit	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	To provide facilities to the helpless, blind, lame and handicapped children, subject to the accommodation and finance available with the ashram	
Major Activities	→ Training in Arts & Crafts → Health Related Activities → Academic Activities → Cultural Activities	
Target group/ Stakeholders	Women and Children	
Geographical location/area	O/S Raipur Gate, Ahmadabad	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	17 <sup>th</sup> December, 1892	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
7 <sup>th</sup> May, 1953	F/45	Ahmadabad
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	10020200000491	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	22	
Total No. of Professional Staff		
a) Male	10	

b) Female	12
Total number of	
a) Full Time	17
b) Part time Staff	5

### FINANCIAL MANAGEMENT

Annual Budget of Organization for last three years

2009-10	2008-09	2007-08
31,00,000	28,00,000	27,00,000

Sources of Funding of the NGO (Cash/kind/other)

Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	-	-	√	-

### DOCUMENTATION

Which of the following documents/communication material are maintained at the organizational level

Annual Report, Brochure, Pamphlet and Audit Report

For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside

No

### Profile of Children Home/ Child Care Institution

<b>Name of Child Care Institution</b>		-		
<b>Contact Details</b>				
a) Name of Superintendent/Secretary		-		
b) Address		-		
c) Phone		-		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		-		
Run by		-		
Year of Establishment of the Home		-		
Supported by		-		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		-		
<b>Number of inmates</b>				
a) Capacity		-		
b) Present Strength		-		
Number of Children lodged in the home having families residing in the same State/UT		-		
Reasons for staying in the home in case of children having families (provide details)		-		
<b>Age breakup of children</b>				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	-	-	-
<b>Details of Stay of Children in the home</b>				
S.No.	Duration	Number of Children		Total

		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-

l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)	-
------------------------------------	---

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	-
---	---

<b>MANPOWER OF CHILDREN HOME</b>						
----------------------------------	--	--	--	--	--	--

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>	
---	--

Whether the organization is following any criteria for admission of children in Homes	-
---	---

If Yes Please mention	-
-----------------------	---

Whether the organization maintains any specific Proforma for recording details of Information of every child	-
--	---

If Yes, what kind of information you have collected from children	-
---	---

Maintenance of Registers/Record Maintenance	
---	--

S. No.	Details of Register	Please Tick	
a)	Admission and discharge register	-	
b)	Individual Care Plan	-	
c)	Supervision register	-	
d)	Medical file or medical report	-	
e)	Nutrition diet file	-	
f)	Stock Register	-	
g)	Visitor's book	-	
h)	Case file	-	
i)	Inquiry report file	-	
j)	Stock register	-	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		-	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		-	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As per doctor advice	
How many cooks are there		Three	
Whether children are helping at the time of cooking in any way		Yes (Above 15 years of age)	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Twice in a Year
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly

d)	Under garments	3	Yearly
e)	Towel	1	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	1	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	√	-
f)	Private coaching	√	-
g)	Bridge Course	√	-
h)	Any other: → UG & PG	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	8	6	2	-	-	-
b)	Primary	8	8	-	-	-	-
c)	Secondary	1	1	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	20	20	-
b)	Beauty Culture	-	5	5	-
c)	Computer	-	35	35	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	35	35	-
f)	Books binding	-	-	-	-



g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				As per requirement	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	-		-	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Thrice in a year	
g)	Cultural Programme	√		Twice in a year	
h)	Yoga	√		In Period	
i)	Debates	√		In Period	
j)	Radio	√		During morning prayer	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Daily, 7:00 a.m. to 5:30 p.m.	
What types of books provide for Children				As per need	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	

g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Staff has been appointed for it
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Training Programme by CARA at New Delhi
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		No Response
Suggestion of CWC/Inspection Committee		→ Satisfied with the facilities
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

<b>GJ/02/ NGO/35</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	District Probation & After Care Association run by Observation Home Bhuruch	
Address for Communication	Kuli Tuluwudi Civil lines. Opposite Multiwatur Public School CBSE Bhuruch	
Telephone (with STD code)	02642-223054	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home, Shelter Home and Observation Home	
Whether run by	NGO	
Name and contact of Chief Functionary	-	
Vision of NGO	Aplimution of JJ Act	
Mission of NGO	-	
Key Objectives	-	
Major Activities	Educational Programme	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	March, 1946	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Bombay Public Trust Act 1950	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
13-4-1954	E-487	Bhuruch
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	-	
Physical Assets of the Organization	Rented Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	7	
Total No. of Professional Staff		
a) Male	7	
b) Female	-	
Total number of		
a) Full Time	5	

b) Part time Staff		2		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09	2007-08	
33		24	15	
Sources of Funding of the NGO (Cash/kind/other)				
Community Support	State Govt.	National	International	
√	√	-	-	
Donation		Any Other (Please specify)		
√		-		
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level		Annual Report and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		District Probation & After Care Association run by Observation Home Bhuruch		
Contact Details				
a) Name of Superintendent/Secretary		Bhurut. B.Thukker		
b) Address		Kuli Tuluwudi Civil lines. Opposite Multiwatur Public School CBSE Bhuruch		
c) Phone		02642-223054		
d) Fax		02642-261548		
e) Email		-		
<b>Type of Institution</b>		Children Home, Shelter Home and Observation Home		
Run by		NGO (District Probation & After Care Association, Govt. of Gujarat)		
Year of Establishment of the Home		March 1946		
Supported by		State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		100		
b) Present Strength		118		
Number of Children lodged in the home having families residing in the same State/UT		-		
Reasons for staying in the home in case of children having families (provide details)		-		
Age breakup of children				
Sino.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	15	15
c)	10-15 years	-	82+2	84

d)	15-18 years	-	16+3	19	
<b>Details of Stay of Children in the home</b>					
Sino.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	3	3	
b)	4-6 month	-	2	2	
c)	6-12 month	-	16	16	
d)	1-2 years	-	30	30	
e)	2-3 years	-	54	54	
f)	3-4 years	-	9	9	
g)	4-5 years	-	4	4	
h)	More than 5 Years	-	-	-	
<b>Number of "Children with special needs" in the home</b>					
Sino.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			All facilities given as per JJ Act-2000		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			All facilities given as per JJ Act-2000		
<b>INFRASTRUCTURE</b>					
<b>Infrastructure available</b>					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
<b>Details of Accommodation for Children and Institutional Infrastructure</b>					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	259	100	120
b)	Classrooms	1	12 * 12	-	-
c)	Sick room/ First Aid Room	1	10 * 10	-	-
d)	Kitchen	1	12 * 15	-	-
e)	Dining Hall	1	40 * 20	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	10 * 10	-	-

j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	4 * 4	-	-
l)	Separate Latrines for boys and girls	2	4 * 4	-	-
m)	Store room	1	12 * 15	-	-
n)	Play Ground	1	320	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 3888.97 Sq.m.

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorary-um per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.Com.	6,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	1	1	M.A.	5,000	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	5,00	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	2	1	P.T.C.	2,500	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	B.A.	2,500	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	1	9 <sup>th</sup>	3,500	-
n)	House Aunty	-	-	-	3,500	-
o)	Security Guard	4	2	10 <sup>th</sup>	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	12	8	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention -

Whether the organization maintains any specific Performa for recording details of Information of every child Yes

If Yes, what kind of information you have collected from children		-	
<b>Maintenance of Registers/Record Maintenance</b>			
S. No.	Details of Register	Please Tick	
a)	Admission and discharge register	√	
b)	Individual Care Plan	√	
c)	Supervision register	-	
d)	Medical file or medical report	√	
e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Medical Facilities in Civil Hospital Bhuruch	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		No	
<b>Referral of Cases</b>			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As per doctor advice	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	-

b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	2	-
d)	Under garments	-	-
e)	Towel	1	-
f)	Derry	-	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/Chappal	2	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

Formal School on Premises		Yes	No
a)	Pre-school	-	-
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	-	√
e)	Non-formal classes	-	√
f)	Private coaching	√	-
g)	Bridge Course	-	√
h)	Any other: → UG & PG	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	13	13	-	Govt.	-	-
c)	Secondary	100	100	-	Private	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	5	5	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-



e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	-		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	-		-	
i)	Debates	√		-	
j)	Radio	√		-	
k)	Any Other: DVD/VCD	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Whole Day	
What types of books provide for Children				All type of books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			No	
d)	Arrangements for disposal of garbage			-	

e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		As per JJ Act
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		2
b) Details of Training Programmes		On JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		➔ Rotary Club, Lion Club, Every Social Club supported by Institution
Suggestion of CWC/Inspection Committee		➔ No Inspection Committee
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

<b>GJ/03/ NGO/36</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Vikas Greh, Ahmedabad	
Address for Communication	P.O.Paldi, Ahmedabad-380007	
Telephone (with STD code)	(079) 26602788	
Fax	26612788	
Email ID	<a href="mailto:vikasgrahahmedabad@gmail.com">vikasgrahahmedabad@gmail.com</a>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Naynaben K.Shah	
Vision of NGO	Education and Rehabilitation	
Mission of NGO	To Care Childen	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	01-05-1937	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Bombay Public Trust Act, 1950	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
12-08-1953	F-50	Ahmedabad
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	10	
Physical Assets of the Organization	Own building and furniture	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	62	
Total No. of Professional Staff		
a) Male	18	
b) Female	44	
Total number of		
a) Full Time	56	
b) Part time Staff	6	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		
2009-10	2008-09	2007-08

1,50,00,000		84,00,000		85,00,000	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	√	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Vikas Greh, Ahmedabad		
Contact Details					
a) Name of Superintendent/Secretary			Naynaben K.Shah		
b) Address			P.O.Paldi, Ahmedabad-380007		
c) Phone			(079) 26602788		
d) Fax			26612788		
e) Email			<a href="mailto:vikasgrahahmedabad@gmail.com">vikasgrahahmedabad@gmail.com</a>		
<b>Type of Institution</b>			Children Home		
Run by			NGO		
Year of Establishment of the Home			-		
Supported by			-		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			150		
b) Present Strength			133		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
Sino.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	29	-	29	
c)	10-15 years	40	-	40	
d)	15-18 years	64	-	64	
Details of Stay of Children in the home					
Sino.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	

g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
Sino.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Hospital, Library, Swimming and Embroidery classes, Education etc.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Hospital, Library, Swimming and Embroidery classes, Education etc		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	30 * 20	200	-
b)	Classrooms	22	30 * 30	60	-
c)	Sick room/ First Aid Room	6	20 * 15	10	-
d)	Kitchen	1	25 * 30	9	-
e)	Dining Hall	1	60 * 30	150	150
f)	Recreation room	1	60 * 30	300	-
g)	Library	2	60 * 30	30	-
h)	Counseling & Guidance room	1	15 * 15	5	-
i)	Office rooms	1	15 * 15	5	-
j)	Workshops	1	22 * 15	15	-
k)	Separate Bathrooms for boys and girls	20	4 * 3	-	-
l)	Separate Latrines for boys and girls	20	3 * 3	-	-
m)	Store room	3	15 * 20	-	-
n)	Play Ground	3	100 * 90	100	-
o)	Vocational Training Centre	1	40 * 30	30	-
Total area of the Campus (Sq. ft.)				-	

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorary-um per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.S.W.	4,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	5,000	-
f)	Paramedical Staff	1	1	-	4,000	-
g)	Educator	2	1	P.T.C.	2,500	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	M. Com.	16,000	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	1	1	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	3	3	6 <sup>th</sup>	6,000	-
n)	House Aunty	2	2	B.A.	12,000	-
o)	Security Guard	4	4	7 <sup>th</sup>	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	2	-	1,400	-
r)	Any other (Please Specify)	-	-	-	-	-
Total		17	17	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Orphanages and Single Parents	
Whether the organization maintains any specific Performa for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					Family Background	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register				Please Tick	
a)	Admission and discharge register				√	
b)	Individual Care Plan				√	
c)	Supervision register				√	
d)	Medical file or medical report				√	

e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Own Hospital	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Three days in a week	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		Milk and Fruits	
How many cooks are there		Three	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	1	Yearly
f)	Derry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	1	Yearly

j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	√	-
f)	Private coaching	√	-
g)	Bridge Course	-	-
h)	Any other: → UG & PG	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students -

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	64	64	1 Year
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-



l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Yearly	
c)	Music	√		Yearly	
d)	Television	√		Yearly	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Monthly	
i)	Debates	√		Monthly	
j)	Radio	√		Daily	
k)	Any Other: DVD/VCD	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				12:00 to 4:00 p.m.	
What types of books provide for Children				All type of books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					

Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	Yes
If Yes,	
a) Number of Training Programmes organized	2
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	No Response
Suggestion of CWC/Inspection Committee	No Response
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	No Response

<b>GJ/04/ NGO/37</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Hindu Anath Asham	
Address for Communication	P.O.Box 46, Nadiad-387001	
Telephone (with STD code)	(0268) 2566559	
Fax	-	
Email ID	hinduanathashram@yahoo.com	
Website of Organization	-	
Type of Child Care Institution being run	Children Home and Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Manish R. Desai	
Vision of NGO	Provide shelter and rehabilitation	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Women and Children	
Geographical location/area	At Nadiad Dist. Kheda, Gujarat	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	15-03-1908	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
30-10-1952	301/61	Baroda
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	042040066	
Any other Registration/ Recognition with Central / State Govt.:	State Govt. Institutions	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	16	
Physical Assets of the Organization	Own building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	8	
Total No. of Professional Staff		
a) Male	4	
b) Female	4	
Total number of		
a) Full Time	7	
b) Part time Staff	1	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		
2009-10	2008-09	2007-08
28,53,656	27,24,614	23,16,705

Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	-	-	√	-
DOCUMENTATION					
Which of the following documents/communication material are maintained at the organizational level			Audit Report, Annual Report and Brochure		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			Yes		
Profile of Children Home/ Child Care Institution					
Name of Child Care Institution			Hindu Anath Asham		
Contact Details					
a) Name of Superintendent/Secretary			Manish R. Desai		
b) Address			"Prasad Alkapuri, College Road, Nadiad-387001		
c) Phone			9825498888		
d) Fax			-		
e) Email			Bobdesai808@gmail.com		
Type of Institution			Children Home		
Run by			NGO (Grant in Aid)		
Year of Establishment of the Home			15 <sup>th</sup> March 1908		
Supported by			State Govt. and Community Support		
Whether registered under 34(3) of JJ Act with the State Government			Yes		
Number of inmates					
a) Capacity			250		
b) Present Strength			101		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			Destitute, Neglected and Orphan Children		
Age breakup of children					
Sino.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	4	2	6	
b)	5-10 years	11	8	19	
c)	10-15 years	21	26	47	
d)	15-18 years	21	8	29	
Details of Stay of Children in the home					
Sino.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	

g)	4-5 years	-	-	-	
h)	More than 5 Years	57	44	101	
Number of "Children with special needs" in the home					
Sino.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Emboidary, Tailoring et.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			Licensed under JJ Act 2000		
Whether the Institution is certified as Fit Institution by			Yes		
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			Shelter, Education, Training of Crafts, Rehabilitation Programmes etc.		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	6	81 * 14.6	-	-
b)	Classrooms	3	42 * 48	-	-
c)	Sick room/ First Aid Room	1	64 * 43	-	-
d)	Kitchen	1	25 * 25	-	-
e)	Dining Hall	1	110 * 25	-	-
f)	Recreation room	-	-	-	-
g)	Library	1	25 * 10	-	-
h)	Counseling & Guidance room	1	24 * 15	-	-
i)	Office rooms	1	22 * 22	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	10	5 * 5	-	-
l)	Separate Latrines for boys and girls	10	5 * 3	-	-
m)	Store room	1	23 * 18	-	-
n)	Play Ground	1	153 * 70	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				236.079	

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	Yes
---	-----

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorary-um per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	2	2	M.Com.	-	-
b)	Social Welfare Officer	1	1	M.S.W.	-	-
c)	Counselor	1	1	M.S.W.	-	-
d)	Case Worker	1	1	M.S.W.	-	-
e)	Doctor (Part time or Full time)	2	2	B.H.M.S.	-	-
f)	Paramedical Staff	1	1	M.M.I.T.	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	2	2	-	-	-
i)	Store-keeper cum Accountant	2	2	B.Com.	-	-
j)	Music Teacher	3	3	B.A.	-	-
k)	Sports/ Yoga Teacher	1	1	B.A. B.Ed.	-	-
l)	Driver	-	-	-	-	-
m)	Cook	3	3	S.S.C.	-	-
n)	House Aunty	5	5	Graduate	-	-
o)	Security Guard	2	2	S.S.C.	-	-
p)	Helper	1	1	S.S.C.	-	-
q)	Sweeper	2	2	S.S.C.	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	28	28	-	-	-

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	-
Whether the organization maintains any specific Performa for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

**Maintenance of Registers/Record Maintenance**

S. No.	Details of Register	Please Tick
a)	Admission and discharge register	√
b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√

e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Own Dispensary with Laboratory	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Daily	
Frequency of Doctor's visit		Daily	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	√	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		Yes	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As Recommended by Medical Officers	
How many cooks are there		Four	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	10	Yearly
b)	Winter Clothing(Jersey)	6	Yearly
c)	School Uniform	4	Yearly
d)	Under garments	6	Yearly
e)	Towel	4	Yearly
f)	Derry	4	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	3	Yearly

j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	√
b)	Primary	-	√
c)	Secondary	-	√
d)	Higher	-	√
e)	Non-formal classes	-	√
f)	Private coaching	√	-
g)	Bridge Course	√	-
h)	Any other: → Coaching Classes	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	29	13	16	Private	-	By Walk
c)	Secondary	38	21	17	Private	-	By Walk
d)	Higher	11	5	6	Private	-	By Walk
e)	Non-formal classes	23	5	18	Private	5 km	By Bus
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	5	18	23	1 Year
b)	Beauty Culture	-	18	18	1 Year
c)	Computer	17	18	35	1 Year
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-



l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Weekly	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	√		Monthly	
j)	Radio	√		Daily	
k)	Any Other: DVD/VCD	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				2:00 to 6:00 p.m.	
What types of books provide for Children				General Knowledge, Educational, Novels, Motivational, Religious etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What types of Co-operation and Co-ordination received for homes	Receiving grant from State Government
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	Yes
If Yes,	
a) Number of Training Programmes organized	1
b) Details of Training Programmes	Orientation about JJ Act 2006 and Other Child Care Programme
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	Directorate of Social Defense, Gandhinagar, Gujarat
Suggestion of CWC/Inspection Committee	Very Good
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	No Response

<b>GJ/05/ NGO/38</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Probation and After Care Association, Ahmadabad District	
Address for Communication	Children Home, Khanpur, Near Cama Hotel, Ahmadabad	
Telephone (with STD code)	079-25601298	
Fax	-	
Email ID	<u>Oha1957@yahoo.in</u>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home, Shelter Home and Observation Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sh. M.P.Trivedi	
Vision of NGO	Welfare of Children	
Mission of NGO	Rehabilitation of Children	
Key Objectives	Rehabilitation of Children	
Major Activities	Rehabilitation of Children	
Target group/ Stakeholders	Children	
Geographical location/area	Ahmadabad Dist.	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	26 <sup>th</sup> December 1957	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
17-09-1962	E-23	Ahmedabad
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	State License No 11	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	31	
Physical Assets of the Organization	Own building and Furniture	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	16	
Total No. of Professional Staff		
a) Male	1	
b) Female	1	
Total number of		
a) Full Time	15	
b) Part time Staff	1	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
16,99,640		17,77,984		16,74,547	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	-	-	√	-
DOCUMENTATION					
Which of the following documents/communication material are maintained at the organizational level			Audit Report, Annual Report and Pamphlet		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>			-		
Contact Details					
a) Name of Superintendent/Secretary					
b) Address					
c) Phone					
d) Fax					
e) Email					
Type of Institution					
Run by					
Year of Establishment of the Home					
Supported by					
Whether registered under 34(3) of JJ Act with the State Government					
Number of inmates					
a) Capacity					
b) Present Strength					
Number of Children lodged in the home having families residing in the same State/UT					
Reasons for staying in the home in case of children having families (provide details)					
Age breakup of children					
Sino.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years				
b)	5-10 years				
c)	10-15 years				
d)	15-18 years				
Details of Stay of Children in the home					
Sino.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	

e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
Sino.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home					
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960					
Any other registration					
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board				
b)	Child Welfare Committee				
If Yes, Please Specify the Facilities provided					
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned			√	
b)	Rented			-	
c)	Lease			-	
d)	Donated			-	
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	75 * 40 22 * 18 13 * 18	-	-
b)	Classrooms	2	41 * 18 13 * 18	-	-
c)	Sick room/ First Aid Room	1	10 * 12 * 12	-	-
d)	Kitchen	1	18 * 18	-	-
e)	Dining Hall	1	37 * 18	-	-
f)	Recreation room	-	-	-	-
g)	Library	1	-	-	-
h)	Counseling & Guidance room	1	-	-	-
i)	Office rooms	1	40 * 18	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	2	18 * 18 30 * 20	-	-
l)	Separate Latrines for boys and girls	2	18 * 18 30 * 20	-	-

m)	Store room	2	15 * 8	-	-
n)	Play Ground	3	50 * 78 30 * 127 95 * 127	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				12700	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorary-um per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.S.W.	5,000	1-1-10
b)	Social Welfare Officer	2	0	-	-	-
c)	Counselor	1	1	-	-	19-12-10
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	500	7-1-03
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	1	1	B.A.	4,500	15-04-05
h)	Vocational Instructor	1	1	B.P.N.T.	4,500	15-04-05
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	3	3	6 <sup>th</sup>	1,500	-
n)	House Aunty	1	1	M.Com.	4,500	-
o)	Security Guard	6	6	6 <sup>th</sup>	8,000	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	3rd	1,500	-
r)	Any other (Please Specify)	-	-	-	-	-
Total		18	16	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	No
If Yes Please mention	N.A.
Whether the organization maintains any specific Performa for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Family Background Details and Educational Details
Maintenance of Registers/Record Maintenance	

S. No.	Details of Register	Please Tick	
a)	Admission and discharge register	√	
b)	Individual Care Plan	-	
c)	Supervision register	-	
d)	Medical file or medical report	√	
e)	Nutrition diet file	-	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	-	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Morning 10:00 a.m. to 7:00 p.m.	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	√	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		No	
If yes, Please provide in details		N.A.	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As Recommended by Medical Officers	
How many cooks are there		Three	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	-	-

d)	Under garments	-	-
e)	Towel	4	Yearly
f)	Derry	-	-
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	2	Yearly
j)	Tooth powder/paste	4	Yearly
k)	Soap	1	Yearly
l)	Oil	100	Monthly
m)	Utensils (Plate and Glass)	2	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	√	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other:	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	1	1	-	Private	-2 km	By Auto
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	31	-	31	2 Year
b)	Beauty Culture	-	-	-	-
c)	Computer	31	-	31	1 Year
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-



g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	31	-	31	1 Month
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				B.P.N.T.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Monthly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	-		-	
i)	Debates	√		Monthly	
j)	Radio	√		Daily	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Morning 10:00 to 6:00 p.m.	
What types of books provide for Children				General Knowledge, Educational, Short Novels, Motivational, Religious etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	

f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Government and NGO give us co-operation for rehabilitation of children
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		In 2009, C.A.G. was inspected our institute for society evaluation of work
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Labour Department, NIPCCD (Indore)
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		No Response
Suggestion of CWC/Inspection Committee		Every week CWC visit our Institute
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		JJ Act, Child Psychology, Nutrition and Diet of children, Medical Disaster Management Training etc.

*Haryana*

<b>HR/01/ NGO/39</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Bharat Vikas Sangh	
Address for Communication	1674/22, Shri Nagar Colony, Rohtak	
Telephone (with STD code)	01262-269171, 216447, 09416210601	
Fax	01262-269171	
Email ID	jaswanti.bvs@gmail.com jaswanti_bvs@yahoo.co.in	
Website of Organization	www.bvsonline.org	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Adv. Jaswanti, Founder Secretary BVS, 09416210601	
Vision of NGO	The good of all mankind irrespective of caste, creed or religion for a just human society	
Mission of NGO	Relief, Rehabilitation, Literacy and social awareness, Self- realization and self support, community health, wealth, liberation and the leadership, empowering and encouraging the people	
Key Objectives	Provide shelter to homeless, poor and needy, Development Leadership Creation, Personality Development, Capacity Building through training & Workshops, To promote Research, Surveys, Evaluation studies in various fields related to Development aspect of Community	
Major Activities	Education Development, Skill Development Training Programme, Family Counselling Centre and Community Sensitization Programme	
Target group/ Stakeholders	Women, Children and Adolescent	
Geographical location/area	Rohtak, Haryana	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	01-May-1993	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under Indian Societies Registration Act Xxi of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
01-07-1994	439	Firm & Societies, Haryana Chandigarh
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	17237006	
Any other Registration/ Recognition with Central / State Govt.:	→ Income Tax Registration Act 1961 &	

	order u/s 12 AA of IT Act 1961, PAN No. AAAAB2424L → Registered as Service Provider Under Section 10 of the PWDV Act 2005 & Rule 11 of the PWDV Rules 2006				
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes				
If Yes, give details of registration	Juvenile Justice (Care and Protection of Children) Amendment Act 2006 Regd. No. 9 Dt. 31/08/2009				
If No, give reasons thereof	N.A.				
Number of Governing Body Members	5				
Physical Assets of the Organization	→ Well established, Well-equipped with furnishing having computers, audio-visual aids → Internet, fax facilities and training hall/ conference hall and situated in easily approach-able place → Transportation: Tata-Sumo, Motorcycle, Scooter, Kinetic Nova, Cycle, etc				
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization	69				
Total No. of Professional Staff					
a) Male	6				
b) Female	12				
Total number of					
a) Full Time	63				
b) Part time Staff	6				
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
68,39,216.00		67,80,539.00		66,16,054.00	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
NA	Govt. of India	Haryana Govt.	Yes	Yes	Membership fee & Contribution
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure, Leaflet, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>					
Contact Details					

a) Name of Superintendent/Secretary				
b) Address				
c) Phone				
d) Fax				
e) Email				
<b>Type of Institution</b>				
Run by				
Year of Establishment of the Home				
Supported by				
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				
Number of inmates				
a) Capacity				
b) Present Strength				
Number of Children lodged in the home having families residing in the same State/UT				
Reasons for staying in the home in case of children having families (provide details)				
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years			
b)	5-10 years			
c)	10-15 years			
d)	15-18 years			
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month			
b)	4-6 month			
c)	6-12 month			
d)	1-2 years			
e)	2-3 years			
f)	3-4 years			
g)	4-5 years			
h)	More than 5 Years			
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-
What are the facilities and support services provided for the children staying in Home				
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960				

Any other registration						
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board					
b)	Child Welfare Committee					
If Yes, Please Specify the Facilities provided						
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned					
b)	Rented					
c)	Lease					
d)	Donated					
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories					
b)	Classrooms					
c)	Sick room/ First Aid Room					
d)	Kitchen					
e)	Dinning Hall					
f)	Recreation room					
g)	Library					
h)	Counseling & Guidance room					
i)	Office rooms					
j)	Workshops					
k)	Separate Bathrooms for boys and girls					
l)	Separate Latrines for boys and girls					
m)	Store room					
n)	Play Ground					
o)	Vocational Training Centre					
Total area of the Campus (Sq. ft.)						
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light						
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/ Year)
a)	Superintendent/ Project Manager					
b)	Social Welfare Officer					
c)	Counselor					
d)	Case Worker					
e)	Doctor (Part time or					

	Full time)					
f)	Paramedical Staff					
g)	Educator					
h)	Vocational Instructor					
i)	Store-keeper cum Accountant					
j)	Music Teacher					
k)	Sports/ Yoga Teacher					
l)	Driver					
m)	Cook					
n)	House Aunty					
o)	Security Guard					
p)	Helper					
q)	Sweeper					
r)	Any other (Please Specify)					
	Total					

### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes

If Yes Please mention

Whether the organization maintains any specific Proforma for recording details of Information of every child

If Yes, what kind of information you have collected from children

### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	
b)	Individual Care Plan	
c)	Supervision register	
d)	Medical file or medical report	
e)	Nutrition diet file	
f)	Stock Register	
g)	Visitor's book	
h)	Case file	
i)	Inquiry report file	
j)	Stock register	
k)	Any other(Please Specify)	

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children

Does the home have a Medical Care Unit for health check-up of Children

If yes, Opening of day, time and duration of MCU

Frequency of Doctor's visit

Whether any trained Staff for first-aid



Referral of Cases			
a)	Govt. Hospital		
b)	Dispensary		
c)	Any other		
How many children are suffering from communicable diseases and HIV/AIDS			
Any specialized services are provided for them			
If yes, Please provide in details			
Whether ambulance facility is available for patients			
Any other Facilities			
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes			
How many times meals are provided in a day			
What types of special diet is provided for sick infant or children			
How many cooks are there			
Whether children are helping at the time of cooking in any way			
Whether any Nutrition and Child Development Officer is there			
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing		
b)	Winter Clothing(Jersey)		
c)	School Uniform		
d)	Under garments		
e)	Towel		
f)	Durry		
g)	Blanket		
h)	Pillow		
i)	Shoes/Chappal		
j)	Tooth powder/paste		
k)	Soap		
l)	Oil		
m)	Utensils (Plate and Glass)		
<b>EDUCATION</b>			
Whether educational facilities are available for children			
Are any of the educational facilities available within the institution			
	Formal School on Premises	Yes	No
a)	Pre-school		
b)	Primary		
c)	Secondary		
d)	Higher		
e)	Non-formal classes		
f)	Private coaching		
g)	Bridge Course		
h)	Any other: Computer Course		

How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school						
b)	Primary						
c)	Secondary						
d)	Higher						
e)	Non-formal classes						
f)	Any other						
Whether the institution is providing any pocket money for out going students							
If Yes, then how much per child month							
Whether the educational facilities are adequate for children							
If No, what are the other facilities required							
VOCATIONAL TRAINING							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring						
b)	Beauty Culture						
c)	Computer						
d)	Jute bags and 'moti' work						
e)	Painting and Mehendi						
f)	Books binding						
g)	Printing						
h)	Auto Rickshaw/motor cycle/mobile repairing						
i)	Candle making						
j)	Pickle making						
k)	Soap making						
l)	Textile Designing						
m)	Electrical trade						
n)	Shoes making/leather craft						
o)	Any other						
Whether instructors are trained							
If Yes, details of qualification							
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course							
Difficulty (if any)							
RECREATIONAL FACILITIES							
Whether recreational facilities are available					Yes		
If yes, what are the recreation facilities available for children in Institution							
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly			
a)	Indoor games						
b)	Outdoor games						

c)	Music		
d)	Television		
e)	Picnic		
f)	Outings		
g)	Cultural Programme		
h)	Yoga		
i)	Debates		
j)	Radio		
k)	Any Other		

### **LIBRARY**

Whether library facilities are available or not

If Yes, Opening timing or day

What types of books provide for Children

### **SANITATION AND HYGIENE**

Whether Sanitation and Hygiene is maintained in the home through following facilities

S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	
c)	Proper drainage System	
d)	Arrangements for disposal of garbage	
e)	Protection from mosquitoes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	
h)	Sufficient space for washing	
i)	Clean and fly-proof kitchen	

### **CO-ORDINATION AND COLLABORATION**

Whether the Organization/Institution is Networking with other Govt., NGOs etc

What types of Co-operation and Co-ordination received for homes

### **MONITORING AND EVALUATION**

Mechanism used by the Institution to monitor the activities of homes

Whether any specific evaluation of the Organization/Institution has been conducted in the past

If Yes, when and by whom

Whether CWC members visit your institution regularly

### **TRAINING NEEDS**

Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff

If Yes,

a) Number of Training Programmes organized

b) Details of Training Programmes

Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	
If Yes, Please specify	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	
Suggestion of CWC/Inspection Committee	
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	

<b>HR/02/ NGO/40</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Bal Sadan Association	
Address for Communication	I-9, Sector 12 A, Panchkula- 134112	
Telephone (with STD code)	0172-2581195, 6572405	
Fax	Nil	
Email ID	<a href="mailto:Balsadan12@co.in">Balsadan12@co.in</a>	
Website of Organization	<a href="http://www.balsadanpxl.org">www.balsadanpxl.org</a>	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Sh. H. K. Khosla	
Vision of NGO	To Uplift the Orphan/ Destitute Children	
Mission of NGO	To able the children to become good citizen of India	
Key Objectives	To make them stand on their feet	
Major Activities	To provide them lodging, boarding, education, medical help.	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	September 1992	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
September 1993	856	Chandigarh
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	172350003	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	Provisional Certificate No 13, Year 2010	
If No, give reasons thereof	-	
Number of Governing Body Members	12	
Physical Assets of the Organization	Own building, furniture etc	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	12	
Total No. of Professional Staff		
a) Male	2	
b) Female	7	
Total number of		
a) Full Time	7	

b) Part time Staff		5			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
15,44149		15,58229		1210052	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
Cash	-	Cash	Cash	Cash	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Bal Sadan Association		
Contact Details					
a) Name of Superintendent/Secretary			Sh. H.K. Khosla		
b) Address			I-9, Sec-12 A, Panchkula		
c) Phone			0172-2581195, 6572405		
d) Fax			-		
e) Email			<a href="mailto:Balsadan12@co.in">Balsadan12@co.in</a>		
<b>Type of Institution</b>			<b>Orphanage (Girls)</b>		
Run by			NGO		
Year of Establishment of the Home			1993		
Supported by			State Govt. and Public		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			50		
b) Present Strength			47		
Number of Children lodged in the home having families residing in the same State/UT			39		
Reasons for staying in the home in case of children having families (provide details)			Earning member expired, father and mother critically ill		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	2	-	2	
b)	5-10 years	15	-	15	
c)	10-15 years	20	1	21	
d)	15-18 years	8	-	8	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	3	-	3	

c)	6-12 month	2	-	2
d)	1-2 years	5	-	5
e)	2-3 years	6	-	6
f)	3-4 years	9	-	9
g)	4-5 years	4	-	4
h)	More than 5 Years	17	1	18

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

N.A.

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960

No

Any other registration

-

Whether the Institution is certified as Fit Institution by

-

a) Juvenile Justice Board

-

b) Child Welfare Committee

√

If Yes, Please Specify the Facilities provided

Boarding/ Lodging, Medical & Education, Transportation

**INFRASTRUCTURE**

Infrastructure available

a) Owned

√

b) Rented

-

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	1	400	20	47
c)	Sick room/ First Aid Room	1	120	2	-
d)	Kitchen	1	200	50	47
e)	Dinning Hall	1	500	50	47
f)	Recreation room	1	250	40	47
g)	Library	1	280	20	47
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	648	8	8
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	8	54	50	47
l)	Separate Latrines for boys and girls	9	54	50	47

m)	Store room	2	120	50	47
n)	Play Ground	2	1400	50	47
o)	Vocational Training Centre	2	510	50	47
Total area of the Campus (Sq. ft.)				9000	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A. B. Ed.	Rs. 5000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.S.	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	4	4	-	Rs. 4000	-
h)	Vocational Instructor	4	1	-	Rs. 1200	-
i)	Store-keeper cum Accountant	1	-	-	-	-
j)	Music Teacher	1	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	8 <sup>th</sup>	Rs. 3800	-
m)	Cook	2	2	8 <sup>th</sup>	Rs. 3200 Rs. 1200	-
n)	House Aunty	2	2	7 <sup>th</sup>	Rs. 2000 Rs. 1000	-
o)	Security Guard	-	-	-	-	-
p)	Helper	2	2	-	Rs. 1800 Rs. 1200	-
q)	Sweeper	2	2	-	Rs. 1200 Rs. 600	-
r)	Any other (Please Specify)	-	-	-	-	-
Total		21	16	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Orphan or destitute
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-
Maintenance of Registers/Record Maintenance	



S. No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	$\checkmark$	
c)	Supervision register	-	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	-	
f)	Stock Register	$\checkmark$	
a)	Visitor's book	$\checkmark$	
b)	Case file	Nil	
c)	Inquiry report file	-	
d)	Stock register	$\checkmark$	
e)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Twice	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	$\checkmark$	
b)	Dispensary	$\checkmark$	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As per advice of Doctor	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		Sometimes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	As required
b)	Winter Clothing(Jersey)	2	As required
c)	School Uniform	2	As required

d)	Under garments	4	As required
e)	Towel	1	As required
f)	Durry	1	As required
g)	Blanket	1	As required
h)	Pillow	1	As required
i)	Shoes/Chappal	2	As required
j)	Tooth powder/paste	1	As required
k)	Soap	1	As required
l)	Oil	-	As required
m)	Utensils (Plate and Glass)	1	As required

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	√
b)	Primary	-	√
c)	Secondary	-	√
d)	Higher	-	√
e)	Non-formal classes	√	-
f)	Private coaching	√	-
g)	Bridge Course	√	-
h)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	6	-	6	Private	2 km	By Bus
b)	Primary	15	-	15	Private	2 km	By Bus
c)	Secondary	18	1	17	Private	2 km	By Bus
d)	Higher	6	-	6	Private	2/10	Public Transport
e)	Non-formal classes	2	-	2	Private	2/10	Public Transport
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	18	18	One Year
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	40	Two Year
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-

f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Diploma in Tailoring and Certificate in Computer Training	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Monthly	
f)	Outings	√		Thrice in a year	
g)	Cultural Programme	√		Occasionally	
h)	Yoga	√		Thrice in a year	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Opened as per requirements	
What types of books provide for Children				General/ Related to their courses	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	

e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

*Karnataka*

<b>KARNATAKA/01/GO/41</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Govt. Juvenile Home for Boys, Cantonment Bellary	
<b>Contact Details</b>				
a) Name of Superintendent/Secretary			-	
b) Address			Govt. Juvenile Home for Boys, Cantonment Bellary	
c) Phone			08392-242065	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Government	
Year of Establishment of the Home			1950	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
<b>Number of inmates</b>				
a) Capacity			200	
b) Present Strength			42	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
<b>Age breakup of children</b>				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	24	24
d)	15-18 years	-	18	18
<b>Details of Stay of Children in the home</b>				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	5	5
e)	2-3 years	-	15	15
f)	3-4 years	-	10	10
g)	4-5 years	-	10	10
h)	More than 5 Years	-	2	2
<b>Number of "Children with special needs" in the home</b>				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-

c)	Physically challenged	-	-	-		
d)	Any other Deaf & Dumb	-	-	-		
What are the facilities and support services provided for the children staying in Home				T.V., Computer, Sports Skills		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				Yes		
Any other registration				No		
Whether the Institution is certified as Fit Institution				Yes		
a)	by Juvenile Justice Board	-				
b)	by Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided				Children Admission Transfer and Released etc.		
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	1	4375	100	40	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	1	260	4	4	
d)	Kitchen	1	300	200	-	
e)	Dinning Hall	4	400	200	200	
f)	Recreation room	1	-	-	-	
g)	Library	1	260	25	25	
h)	Counselling & Guidance room	1	400	200	200	
i)	Office rooms	1	400	200	200	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	4	180	4	4	
l)	Separate Latrines for boys and girls	4	180	4	4	
m)	Store room	1	260	200	200	
n)	Play Ground	1	10 Acres	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				33.66 Acres		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorar	Associate d with the

					-um per month	Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	MSW	10,800	-
b)	Social Welfare Officer	4	1	MSW	10,800	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	3	1	MA	7,275	-
e)	Doctor (Part time or Full time)	3	1	M.B.B.S	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	6	6	-	5,800	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	--
l)	Driver	-	-	-	-	-
m)	Cook	2	1	4 <sup>th</sup>	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	2	1	7 <sup>th</sup>	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	1	-	4800	-
r)	Any other (Please Specify)	4	1	-	4800	-
	Total	27	10			

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		According to Children JJ Act
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		Home Enquiry, Health Checkup, FIR for Children
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	-
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>



j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	1	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	-	Yearly
i)	Shoes/ Chappal	2	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	100g	Monthly
m)	Utensils (Plates and Glasses)	2	Yearly
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			

S.No	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	-	-				
c)	Secondary	√	-				
d)	Higher	-	-				
e)	Non-formal classes	-	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other	ITI	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	3	3	-	Govt.	1km	Walk
c)	Secondary	7	7	-	Govt.	1km	Walk
d)	Higher	26	26	-	Govt.	1km	Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	5	5	-	Govt.	1km	Walk
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					-		
If Yes, details of qualification					-		
Whether networking with any Institute/NGO/placement Agency for					-		

placement of children after completion of Course			
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	√	Daily
c)	Music	-	-
d)	Television	√	Daily
e)	Picnic	-	-
f)	Outings	-	-
g)	Cultural Programme	√	Yearly
h)	Yoga	-	-
i)	Debates	√	Daily
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		8:00 a.m.- 9:00a.m. 8:00 p.m. – 9:00 p.m.	
What types of books provide for Children		Newspaper, Weekly Magazine and National Leader book, Novels	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	√	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	√	
c)	Proper drainage System	√	
d)	Arrangements for disposal of garbage	√	
e)	Protection from mosquitoes	-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	√	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	√	
h)	Sufficient space for washing	√	
i)	Clean and fly-proof kitchen	√	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No	
What type of Co-operation and Co-ordination has been received for homes		-	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		-	

Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes,	
a) Number of Training Programmes organized	1
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Psycho Social Training
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ Good Education</li> <li>★ Good Health</li> <li>★ Not for Child Labour</li> </ul>
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ Understanding counseling techniques training for the superintendent.</li> </ul>

<b>KARNATAKA/02/GO/42</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>		Govt. Children Home Belgaum		
Contact Details				
a) Name of Superintendent/Secretary		Mrs. R.S.Vadagaon Kar		
b) Address		IIIrd cross shivaji nagar, Belgaum-590016, Karnataka		
c) Phone		-		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		Women & Child Development Department.		
Year of Establishment of the Home		2004		
Supported by		State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		50		
b) Present Strength		13		
Number of Children lodged in the home having families residing in the same State/UT		All		
Reasons for staying in the home in case of children having families (provide details)		Singal Parents, Neglected BPL etc.		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	10	10
c)	10-15 years	-	3	3
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	2	2
d)	1-2 years	-	4	4
e)	2-3 years	-	6	6
f)	3-4 years	-	-	-
g)	4-5 years	-	1	1
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				

S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other Deaf & Dumb	-	-	-	
What are the facilities and support services provided for the children staying in Home				N.A.	
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				No	
Any other registration				No	
Whether the Institution is certified as Fit Institution				Yes	
a)	by Juvenile Justice Board			-	
b)	by Child Welfare Committee			√	
If Yes, Please Specify the Facilities provided				-	
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned			√	
b)	Rented			-	
c)	Lease			-	
d)	Donated			-	
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	6.7*9.50	50	13
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	3.05*6.35	-	-
d)	Kitchen	1	6.70*4.55	20	13
e)	Dinning Hall	-	-	-	-
f)	Recreation room	1	6.7*6.70	-	-
g)	Library	-	3.0*6.25	-	-
h)	Counselling & Guidance room	1	3.05*6.35	25	13
i)	Office rooms	1	4.55*6.35	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	1.50*0.090	-	-
l)	Separate Latrines for boys and girls	5	1.45*1.75	-	-
m)	Store room	1	5.00*3.30	-	-
n)	Play Ground	1	225 sq m	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	-	2006
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	-	2004
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S. M.D.	-	2004
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	S.S.L.C	-	2004
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	2	2	-	-	2007
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	-	-	2007
r)	Any other (Please Specify)	-	-	-	-	-
	Total	7	7	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		-
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>

i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	√	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Once in a week.	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	Yes	
c)	Any other	Yes	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		No	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two Times	
What types of special diet is provided for sick infant or children		Yes	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	1	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	1 Pair	Yearly
j)	Tooth powder/paste	100 gm	Monthly
k)	Soap	150gm	Monthly
l)	Oil	100 gm	Monthly
m)	Utensils (Plates and Glasses)	2	Yearly
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	



Are any of the educational facilities available within the institution							
S.No	Formal School on Premises				Yes	No	
a)	Pre-school				√	√	
b)	Primary				-	√	
c)	Secondary				-	√	
d)	Higher				-	√	
e)	Non-formal classes				-	√	
f)	Private coaching				-	√	
g)	Bridge Course				√	√	
h)	Any other				-	-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	13	13	-	Govt.	1/2 km	By walk
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						No	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
VOCATIONAL TRAINING							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					No		

If Yes, details of qualification		-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		Yes	
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Once in a week
b)	Outdoor games	√	Once in a week
c)	Music	-	Once in a week
d)	Television	√	Alternative daily
e)	Picnic	√	Once in a month
f)	Outings	√	-
g)	Cultural Programme	√	Once in a Year
h)	Yoga	√	Daily
i)	Debates	-	-
j)	Radio	√	Daily
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		-	
What types of books provide for Children		-	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	√	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	√	
c)	Proper drainage System	√	
d)	Arrangements for disposal of garbage	√	
e)	Protection from mosquitoes	√	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	√	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	√	
h)	Sufficient space for washing	√	
i)	Clean and fly-proof kitchen	√	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		Play matrices, recreation or donation	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of		Inspecting Authority	

homes	
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	By Deputy Director, WCD
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes,	
a) Number of Training Programmes organized	2
b) Details of Training Programmes	JJ Act Care and protection
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Department of Education Health</li> <li>★ Rotary and lions clubs</li> <li>★ Civil Supply</li> </ul>
Suggestion of CWC/Inspection Committee	-
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	-

<b>KARNATAKA/03/GO/43</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Govt. Boys Homes	
Contact Details				
a) Name of Superintendent/Secretary			Mamtaz	
b) Address			-	
c) Phone			08272-228220	
d) Fax			-	
e) Email			<a href="mailto:mamtazhuntiar@yahoo.com">mamtazhuntiar@yahoo.com</a>	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Govt.	
Year of Establishment of the Home			23 November 2003	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			50	
b) Present Strength			36	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Poverty, Broken family, Orphans, Destitutions	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	19	19
c)	10-15 years	-	15	15
d)	15-18 years	-	2	2
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	17	17
d)	1-2 years	-	8	8
e)	2-3 years	-	7	7
f)	3-4 years	-	4	4
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	1	1

b)	Autism	-	-	-	
c)	Physically challenged	-	1	1	
d)	Any other Deaf & Dumb	-	-	-	
What are the facilities and support services provided for the children staying in Home			Computer, Extra coaching classes, Spoken classes, Indoor games, Outer games playground, Refrigerator, Inverter, Washing Machine, Yoga Classes, etc.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution			Yes		
a)	by Juvenile Justice Board	-			
b)	by Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	-	-
b)	Classrooms	0	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	4.50*2.80m	-	-
e)	Dinning Hall	1	10.10*3.60m	-	-
f)	Recreation room	1	5.40*3.55	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	1	4.10*3.60m	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	1.20*1.20m 1.00*1.10m 2.80*2.30m	-	-
l)	Separate Latrines for boys and girls	4	1.00*1.10m 1.20*1.20m	-	-
m)	Store room	1	3.00*2.60m	-	-
n)	Play Ground	1	35.00*30.00m	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				One Acre	
Whether the dormitories, classrooms and workshops have sufficient				Yes	

ventilation and Light						
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.S.W	20,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	1	1	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	6	4	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Death certificate in case of orphan	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
What kind of information you have collected from children					Home enquiry report from the probation officer	
Maintenance of Registers/Record Maintenance						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register				<input checked="" type="checkbox"/>	
b)	Individual Care Plan				<input checked="" type="checkbox"/>	
c)	Supervision register				<input checked="" type="checkbox"/>	
d)	Medical file or medical report				<input checked="" type="checkbox"/>	

e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	√	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Yes	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Once in three month	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	Yes	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nobody	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		Milk, Extra Food	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Sometime	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	4	Yearly
e)	Towel	2	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	2	Yearly
j)	Tooth powder/paste	4	Yearly
k)	Soap	1	Monthly

l)	Oil		30 gm	Monthly			
m)	Utensils (Plates and Glasses)		1	Yearly			
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes				
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	-			
b)	Primary		-	-			
c)	Secondary		-	-			
d)	Higher		-	-			
e)	Non-formal classes		-	-			
f)	Private coaching		-	-			
g)	Bridge Course		-	-			
h)	Any other		-	-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	3	3	-	Govt.	1 km	By walk
c)	Secondary	3	3	-	Govt.	1 km	By walk
d)	Higher	2	2	-	Govt.	1 km	By walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	36	-	36	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		



m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				B.S.W.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Monthly	
f)	Outings	√		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	-		Daily	
j)	Radio	√		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			√	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			√	
c)	Proper drainage System			√	
d)	Arrangements for disposal of garbage			√	
e)	Protection from mosquitoes			√	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			√	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			√	
h)	Sufficient space for washing			√	
i)	Clean and fly-proof kitchen			√	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				Yes	

What type of Co-operation and Co-ordination has been received for homes	To develop the infrastructure
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Develop Infrastructure</li> <li>★ Provide recreation</li> <li>★ Improve overall condition of the institution and the children</li> </ul>
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ They should tune up the staffs to work well. They should make the children to participate in the decision making.</li> </ul>
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	-

<b>KARNATAKA/04/GO/44</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Govt. Children Homes for Boys, Bagalkot	
Contact Details				
a) Name of Superintendent/Secretary			K. Bheemappa	
b) Address			Near New R.T.O, Office Navanagar, Bagalkot	
c) Phone			08354- 200401	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Govt.	
Year of Establishment of the Home			1st February, 2001	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			50	
b) Present Strength			45	
Number of Children lodged in the home having families residing in the same State/UT			39	
Reasons for staying in the home in case of children having families (provide details)			Due to single parents and poor families.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	2	2
c)	10-15 years	-	27	27
d)	15-18 years	-	16	16
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	10	10
c)	6-12 month	-	-	-
d)	1-2 years	-	4	4
e)	2-3 years	-	9	9
f)	3-4 years	-	6	6
g)	4-5 years	-	7	7
h)	More than 5 Years	-	9	9
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Single Eye)	-	1	1	
What are the facilities and support services provided for the children staying in Home				Food, Clothing and Bedding, Shelter, School and Skill Training.	
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				No	
Any other registration				-	
Whether the Institution is certified as Fit Institution				No	
a)	by Juvenile Justice Board			-	
b)	by Child Welfare Committee			-	
If Yes, Please Specify the Facilities provided				-	
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned			-	
b)	Rented			√	
c)	Lease			-	
d)	Donated			-	
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	8	12*12'	6	6
c)	Sick room/ First Aid Room	1	12*12'	6	-
d)	Kitchen	1	12*12'	-	-
e)	Dinning Hall	-		-	-
f)	Recreation room	1	12*12'	-	-
g)	Library	-		-	-
h)	Counselling & Guidance room	1	12*12'	-	-
i)	Office rooms	2	12*14'	-	-
j)	Workshops	-		-	-
k)	Separate Bathrooms for boys and girls	3	4'*3'	-	-
l)	Separate Latrines for boys and girls	3	4'*3'	-	-
m)	Store room	2	12*12'	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				6500 Sq ft	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					
S. No	Details of Staff	Sanctioned	Actual	Educational	Salary / Associate

		Strength	Strength	Qualification	Honorarium per month	Salary with the Institution (Month/Year)
a)	Superintendent/Project Manager	1	0	Graduate	10,000/-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	5000/-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	2	2	B.ED.	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	SSLC	5800-10500	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	7 <sup>th</sup>	3640/-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	3	3	7 <sup>th</sup>	3440/-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	4 <sup>th</sup>	3440/-	-
r)	Any other (Please Specify)	1	1	SDA, SSLC	5800/-	-
	Total	12	12			

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Through C.W.C and Home enquiries
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		Detail Case Files
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>

i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	√ (Counseling Register)	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		All Medical Facilities available in Government Hospital	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other H.S.K Medical College Bagalkot	Yes	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		No	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		Free Transportation Facilities by State Government.	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		As per suggestion of Doctors	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	1	Yearly
j)	Tooth powder/paste	100 gm	Monthly
k)	Soap	250 gm	Monthly
l)	Oil	100 gm	Monthly

m)	Utensils (Plates and Glasses)	1 Set	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	√	-				
c)	Secondary	√	-				
d)	Higher	√	-				
e)	Non-formal classes	-	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	19	19	-	Govt.	1/2 km	By walk
c)	Secondary	23	23	-	Private	1/2 km	By walk
d)	Higher	2	2	-	ITI	1 km	By walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	1	1	-	-	6 km	By Bus
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	12	-	12	2 months		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/mobile repairing	6 Nos	-	6 Nos	2 Months		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		

n)	Shoes making/leather craft	-	-	-	-
o)	Any other Cycle repair	12		12	2 Months
Whether instructors are trained				Yes	
If Yes, details of qualification				Training given by recognized training centre and trained persons	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Boys are studying in 9 <sup>th</sup> and 10 <sup>th</sup> Standard	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Per Week	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Vocationally	
i)	Debates	√		Monthly	
j)	Radio	-		-	
k)	Any Other Tour	√		Yearly	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			√	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			√	
c)	Proper drainage System			√	
d)	Arrangements for disposal of garbage			√	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			√	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			√	
h)	Sufficient space for washing			√	
i)	Clean and fly-proof kitchen			-	



<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What type of Co-operation and Co-ordination has been received for homes	Vocational Training, Auditorium facility and Resource Persons
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	Proper Supervising
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Psycho- Social Care for Women and Child in the institution.
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ B.V.V.S. Rud Set Institution Bagalkot</li> <li>★ Anjuman Education Society, Bagalkot</li> <li>★ Swadeshi Adoption Centre, Bagalkot</li> <li>★ Ham-Vema Education Society, Bagalkot</li> </ul>
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ Library with all type of books is to be established in the institution</li> <li>★ Supply of study materials in the form of CD's to be made available to the children</li> </ul>
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	★ NIPCCD Bangalore

<b>KARNATAKA/05/GO/45</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Govt. Children Homes for Boys, Gulbarga	
Contact Details				
a) Name of Superintendent/Secretary			Syed Hamed Ali	
b) Address			Pragathi Colony, Gulbarga-585105	
c) Phone			08472-269438	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Govt. (Women and Child Development Department)	
Year of Establishment of the Home			1963	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
c) Capacity			100	
d) Present Strength			45	
Number of Children lodged in the home having families residing in the same State/UT			43	
Reasons for staying in the home in case of children having families (provide details)			Single Parents, Orphans and Missing Children	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	18	18
c)	10-15 years	-	19	19
d)	15-18 years	-	8	8
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	3	3
b)	4-6 month	-	8	8
c)	6-12 month	-	2	2
d)	1-2 years	-	9	9
e)	2-3 years	-	5	5
f)	3-4 years	-	8	8
g)	4-5 years	-	4	4
h)	More than 5 Years	-	6	6
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	

e)	Mentally challenged	-	1	1	
f)	Autism	-	-	-	
g)	Physically challenged	-	1	1	
h)	Any other (Single Eye)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Care and Protection, Education Food and Shelter, Entertainment, Sports and games, Clothing and Bedding, Khat-gadi, Utensils, Books and Stationary, Chappal – towel – Soap, Coconut oil and T.V.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution			Yes		
a)	by Juvenile Justice Board	-			
b)	by Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			In the direction of CWC, this home is developing, providing facilities as mentioned in column no 48, on the other side Home placement, transfer them to other institutions inside the state and outside the state for their rehabilitation.		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	6.0 * 11.7	100	45
b)	Classrooms	2	12.5 * 6.0	40	10
c)	Sick room/ First Aid Room	1	3.5 * 6.0	10	4
d)	Kitchen	1	5.5 * 6.0	-	45
e)	Dinning Hall	1	12.5 * 6.0	100	45
f)	Recreation room	1	12.5 * 6.0	40	45
g)	Library	-	-	-	-
h)	Counselling & Guidance room	1	6.6 * 6.0	10	4
i)	Office rooms	1	3.7 * 6.0	-	4
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	6	1.5 * 2.0	40	45

l)	Separate Latrines for boys and girls	6	1.5 * 2.8	40	45	
m)	Store room	1	6.0 * 11.7	-	-	
n)	Play Ground	1	504 sq m	100	45	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				1080 Sq m		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	Degree	25,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	8,000	-
d)	Case Worker	1	1	Degree	20,000	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	1	1	Nursing	20,000	-
g)	Educator	3	2	T.C.H.	30,000	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	2	2	SSLC	30,000	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	1	7 <sup>th</sup>	12,000	-
n)	House Aunty	2	2	SSLC	22,000	-
o)	Security Guard	2	2	Non SSLC	30,000	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	7 <sup>th</sup>	10,000	-
r)	Any other (Please Specify)	1	1	7 <sup>th</sup>	10,000	-
Total		17	14	-	217,000	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes				Yes		
If Yes Please mention				Admission through CWC decision		
Whether the organization maintains any specific Proforma for recording details of Information of every child				Yes		
What kind of information you have collected from children				About child, his family members, address, background		

		and report of P.O.	
<b>Maintenance of Registers/Record Maintenance</b>			
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register	<input checked="" type="checkbox"/>	
b)	Individual Care Plan	<input checked="" type="checkbox"/>	
c)	Supervision register	-	
d)	Medical file or medical report	<input checked="" type="checkbox"/>	
e)	Nutrition diet file	<input checked="" type="checkbox"/>	
f)	Stock Register	<input checked="" type="checkbox"/>	
g)	Visitor's book	<input checked="" type="checkbox"/>	
h)	Case file	<input checked="" type="checkbox"/>	
i)	Inquiry report file	<input checked="" type="checkbox"/>	
j)	Stock register	<input checked="" type="checkbox"/>	
k)	Any other(Please Specify) (Guard Register)	<input checked="" type="checkbox"/>	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		F.A. Box- then referring to Government Hospital	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		Yes	
<b>Referral of Cases</b>			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other Private hospital if direction given by advise of Govt. Doctor	Yes	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		As per Govt. Doctor's Suggest	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency

			(Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	2	Yearly
d)	Under garments	-	-
e)	Towel	2	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	2	Yearly
i)	Shoes/ Chappal	1	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	150 gm	Monthly
m)	Utensils (Plates and Glasses)	1 + 1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

S.No	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	√	-
c)	Secondary	-	√
d)	Higher	-	√
e)	Non-formal classes	√	-
f)	Private coaching	-	√
g)	Bridge Course	-	√
h)	Any other-- Tuition	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	11	11	-	Govt.	¼ km	Walk
c)	Secondary	19	19	-	Govt.	¼ km	Walk
d)	Higher	6	6	-	Govt.	½ km	Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate foe children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-

b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Weekly	
c)	Music	√		Weekly	
d)	Television	√		Weekly	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	-		-	
i)	Debates	√		Monthly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			√	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			√	

c)	Proper drainage System	√
d)	Arrangements for disposal of garbage	√
e)	Protection from mosquitoes	-
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	√
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	√
h)	Sufficient space for washing	√
i)	Clean and fly-proof kitchen	√
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What type of Co-operation and Co-ordination has been received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		As per Govt. direction and CWC order.
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Psycho social Care for Women and Children in the institution for 3 days
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		★ To improve the quality of work by all the staff for good service to the children
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities		★ JJ Act ★ Counseling



<b>KARNATAKA/06/GO/46</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Shishu greha	
<b>Contact Details</b>				
a) Name of Superintendent/Secretary			Haleema.K.	
b) Address			Manigowda Road, Bangalore-29	
c) Phone			26569344	
d) Fax			-	
e) Email			<a href="mailto:shishumandira@mail.com">shishumandira@mail.com</a>	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Govt.	
Year of Establishment of the Home			2005	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
<b>Number of inmates</b>				
a) Capacity			20	
b) Present Strength			4	
Number of Children lodged in the home having families residing in the same State/UT			4	
Reasons for staying in the home in case of children having families (provide details)			Abandoned	
<b>Age breakup of children</b>				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	4	-	4
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	-	-	-
<b>Details of Stay of Children in the home</b>				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	4	-	4
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
<b>Number of "Children with special needs" in the home</b>				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-

b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (Single Eye)	-	-	-		
What are the facilities and support services provided for the children staying in Home			-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-			
Any other registration			-			
Whether the Institution is certified as Fit Institution			No			
a)	by Juvenile Justice Board	-				
b)	by Child Welfare Committee	-				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	2	3			
b)	Classrooms	1	3			
c)	Sick room/ First Aid Room	1	1			
d)	Kitchen	1	3			
e)	Dinning Hall	1	3			
f)	Recreation room	1	3			
g)	Library	-	-			
h)	Counselling & Guidance room	1	1			
i)	Office rooms	3	3			
j)	Workshops	1	3			
k)	Separate Bathrooms for boys and girls	2	2			
l)	Separate Latrines for boys and girls	2	2			
m)	Store room	2	3			
n)	Play Ground	1	4			
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/

						Year)
a)	Superintendent/ Project Manager	1	1	M.S.W.	-	Oct. 2007
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	2	2	M.S.W.	5,500	2007
d)	Case Worker	-	-	-	-	2008
e)	Doctor (Part time or Full time)	1	1	Pediatrics	6,000	-
f)	Paramedical Staff	2	1	Nursing	5,500	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	8	4	-	8,000	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Only orphan children
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		Name and family information
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	-

### Minimum Standard of Care

### MEDICAL CARE

What are the health related services available for Children		The pediatrician is visiting the institutions everyday	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		9:00 a.m. – 7:30 p.m.	
Frequency of Doctor's visit		Daily	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		As per Govt. Doctor's Suggest	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Blanket	Since the children are below 6 years , the clothing and bedding are issued as and when it is required.	
h)	Pillow		
i)	Shoes/ Chappal	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plates and Glasses)	-	-
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			
S.N o	Formal School on Premises	Yes	No

a)	Pre-school				√		-
b)	Primary				-		-
c)	Secondary				-		-
d)	Higher				-		-
e)	Non-formal classes				-		-
f)	Private coaching				-		-
g)	Bridge Course				-		-
h)	Any other-- Tuition				-		-
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						-	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					-		
If Yes, details of qualification					-		
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					-		

Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	-
b)	Outdoor games	√	-
c)	Music	√	-
d)	Television	√	-
e)	Picnic	√	-
f)	Outings	-	-
g)	Cultural Programme	√	-
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	√	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		-	
If Yes, Opening timing or day		-	
What types of books provide for Children		-	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	√	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	√	
c)	Proper drainage System	√	
d)	Arrangements for disposal of garbage	√	
e)	Protection from mosquitoes	√	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	√	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	√	
h)	Sufficient space for washing	√	
i)	Clean and fly-proof kitchen	√	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		Donation in type of clothing and play materials.	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		-	
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes	

If Yes, when and by whom	Department
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes, a) Number of Training Programmes organized	One (Every 6 month)
b) Details of Training Programmes	How to handle the children
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Adoption guidelines organized by CARA and the department.
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	-

<b>KARNATAKA/07/GO/47</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Children Home for Boys	
Contact Details				
a) Name of Superintendent/Secretary			G. Rukmini	
b) Address			Children Home for Boys Anderson pet Post Muskan K.G.F	
c) Phone			274634	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			1977	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			30	
Number of Children lodged in the home having families residing in the same State/UT			30	
Reasons for staying in the home in case of children having families (provide details)			Missing Children, Abandoned Children, Orphan Children, Single Parents. This type of Children only and poor family children.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	6	6
c)	10-15 years	-	18	18
d)	15-18 years	-	6	6
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	6	6
b)	4-6 month	-	16	16
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	9	9



g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Single Eye)	-	-	-	
What are the facilities and support services provided for the children staying in Home			N.A.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			No		
Whether the Institution is certified as Fit Institution			Yes		
a)	by Juvenile Justice Board		-		
b)	by Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			We have provided separate committee rooms, phone, stationary, cup-boards, special files comfortable table, chairs etc (T.A. D.A. for every sittings)(attached bath rooms)		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		√		
b)	Rented		-		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	4	30/15	25	30
b)	Classrooms	4	20/20	20	30
c)	Sick room/ First Aid Room	2	10/8	-	-
d)	Kitchen	1	20/15	-	-
e)	Dinning Hall	2	20/20	50	-
f)	Recreation room	1	20/30	100	-
g)	Library	1	15/10	-	-
h)	Counselling & Guidance room	1	15/10	-	-
i)	Office rooms	1	10/8	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	6	6/5	-	-
l)	Separate Latrines for boys and girls	8	6/5	-	-

m)	Store room	1	20/10	-	-	
n)	Play Ground	1	100/80	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				1 Acre		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Degree	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	0	0	-	-	-
d)	Case Worker	2	2	-	-	-
e)	Doctor (Part time or Full time)	1	1	-	-	-
f)	Paramedical Staff	1	1	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	1	-	-	-
n)	House Aunty	2	1	-	-	-
o)	Security Guard	2	2	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other (Please Specify)	Typist - 1 Dhobi - 1	1 1	-	-	-
Total		14	13	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes				Yes		
If Yes Please mention				Below poverty, single parents, orphan children, children diseased parents, neglected children.		
Whether the organization maintains any specific Proforma for recording details of Information of every child				Yes		
What kind of information you have collected from children				Separate case files for every children, hospital books,		

		(Medical)	
Maintenance of Registers/Record Maintenance			
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register	<input checked="" type="checkbox"/>	
b)	Individual Care Plan	<input checked="" type="checkbox"/>	
c)	Supervision register	<input checked="" type="checkbox"/>	
d)	Medical file or medical report	<input checked="" type="checkbox"/>	
e)	Nutrition diet file	<input checked="" type="checkbox"/>	
f)	Stock Register	<input checked="" type="checkbox"/>	
g)	Visitor's book	<input checked="" type="checkbox"/>	
h)	Case file	<input checked="" type="checkbox"/>	
i)	Inquiry report file	<input checked="" type="checkbox"/>	
j)	Stock register	<input checked="" type="checkbox"/>	
k)	Any other(Please Specify)	Leave register children belonging register.	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Health Check-up (Specially teeth, eye, and medical check-up)	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		From Morning till Evening	
Frequency of Doctor's visit		Yes	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	<input checked="" type="checkbox"/>	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		No one	
Any specialized services are provided for such children		Yes	
Whether ambulance facility is available for patients		No	
Any other Facilities		From CDPO- Providing Zeep for urgency (Abandoned infants)	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		Nutrition food like leafy vegetable, greens, pulses, grains, fruits.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Once in a way for cutting vegetable	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-

b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e) 1	Towel	-	-
f)	Durry	-	-
g)	Blanket	-	-
h)	Pillow	-	-
i)	Shoes/ Chappal	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plates and Glasses)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	√
b)	Primary	-	√
c)	Secondary	-	√
d)	Higher	-	√
e)	Non-formal classes	√	-
f)	Private coaching	√	-
g)	Bridge Course	-	-
h)	Any other-- Tuition	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school						
b)	Primary	8	8	-	Govt.	1 km	Walk
c)	Secondary	10	10	-	Govt.	1 km	Walk
d)	Higher	3	3	-	Govt.	1 km	Walk
e)	Non-formal classes	6	6	-	Govt.	1 km	By Cycle
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month No

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-

d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	√		-	
j)	Radio	-		-	
k)	Any Other	Annual Programme		Yearly	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Only Saturday	
What types of books provide for Children				Moral Stories, National Leaders Stories.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			√	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			√	
c)	Proper drainage System			√	

d)	Arrangements for disposal of garbage	√
e)	Protection from mosquitoes	√
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	√
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	√
h)	Sufficient space for washing	√
i)	Clean and fly-proof kitchen	√
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		Health related facilities, police, reviewing the children, tracing the children etc.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		Yes
If Yes, a) Number of Training Programmes organized		1
b) Details of Training Programmes		Counseling, JJ Act, Child right and awareness programme.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Regarding JJ Act, Counseling psychology and mentally retarded children.
<b>DEPARTMENTAL COOPERATION</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Sathi, Bosco, Apsa for tracing the children, giving food co-operation to the government institutions. ★ In government health department, police department and education department etc.
Suggestion of CWC/Inspection Committee		★ They are giving good co-operation regarding children admission, relieving foster care, adoption and sponsorship programme for relieving children and community children.

<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	-
---	---

<b>KARNATAKA/08/GO/48</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>		Children Home for Girls, Gulbarga		
Contact Details				
a) Name of Superintendent/Secretary		Smt. Papamma. S. Habalkar		
b) Address		Aland Road, Gulbarga		
c) Phone		08472-244756		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		State Govt. (Department of Women and Child Development)		
Year of Establishment of the Home		1997		
Supported by		State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		100		
b) Present Strength		65		
Number of Children lodged in the home having families residing in the same State/UT		49		
Reasons for staying in the home in case of children having families (provide details)		Single Parents and Children in need of care and protection		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	28	-	28
c)	10-15 years	24	-	24
d)	15-18 years	13	-	13
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	3	-	3
b)	4-6 month	5	-	5
c)	6-12 month	3	-	3
d)	1-2 years	11	-	11
e)	2-3 years	11	-	11
f)	3-4 years	2	-	2
g)	4-5 years	20	-	20
h)	More than 5 Years	10	-	10
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total



		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	2	-	2	
d)	Any other	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Clothing, Bedding, Education, Medical Care, Rehabilitation and Residential Support		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution			Yes		
a)	by Juvenile Justice Board		-		
b)	by Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			Food, Clothing, Bedding, Education, Medical Care, Rehabilitation and Residential Support		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		√		
b)	Rented		-		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2			
b)	Classrooms	2			
c)	Sick room/ First Aid Room	1			
d)	Kitchen	1			
e)	Dinning Hall	-			
f)	Recreation room	-			
g)	Library	-			
h)	Counselling & Guidance room	-			
i)	Office rooms	1			
j)	Workshops	-			
k)	Separate Bathrooms for boys and girls	4			
l)	Separate Latrines for boys and girls	4			
m)	Store room	1			
n)	Play Ground	1			
o)	Vocational Training Centre	-			
Total area of the Campus (Sq. ft.)				-	

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					No	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	M.A.	11,400 – 22,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	1	M.S.W.	8,000	-
d)	Case Worker	2	1	M.A	13,350	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	3	2	T.C.H.	12,650	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	SSLC	11,700	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	-	-
n)	House Aunty	2	1	SSLC	6,950	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	-	-	-	-
r)	Any other (Please Specify)	1	1	-	-	-
	Total	12	6	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Orphan, Single Parents, Abuse, Child Labour, Child Marriage, Children in need of Care and Protection	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
What kind of information you have collected from children					Family information, Income, Ration Card, Death certificate, Photos, and T.C.S Marks Card.	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	

a)	Admission and discharge register	√
b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify) M.C. Register	√

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	→ First Aid Box
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	No
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other Private Hospital	√
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for such children	-
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Two Times
What types of special diet is provided for sick infant or children	As suggested by Doctor.
How many cooks are there	One
Whether children are helping at the time of cooking in any way	Yes
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	3	Yearly
d)	Under garments	-	-
e)	Towel	1	Yearly

f)	Durry	-	-				
g)	Blanket	1	5 Yearly				
h)	Pillow	1	Yearly				
i)	Shoes/ Chappal	2	Yearly				
j)	Tooth powder/paste	2	Monthly				
k)	Soap	1	Monthly				
l)	Oil	150 gm	Monthly				
m)	Utensils (Plates and Glasses)	2	2 Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	-	-				
c)	Secondary	-	-				
d)	Higher	-	-				
e)	Non-formal classes	√	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other – Supplementary Exam Appear	√	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	20	-	20	Govt.	½ km	Walk
c)	Secondary	18	-	18	Govt.	½ km	Walk
d)	Higher	15	-	15	Govt.	1 km	Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	3	-	3	Govt.	7 km	Bus
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	20	20	1 Year		
d)	Jute bags and 'moti' work	-	15	15	6 Months		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	15	15	6 Months
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Weekly	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Daily	
i)	Debates	√		Monthly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				Story, Scientific Knowledge, General Knowledge.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			√	
c)	Proper drainage System			√	
d)	Arrangements for disposal of garbage			√	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets			-	

	(at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	-
h)	Sufficient space for washing	√
i)	Clean and fly-proof kitchen	√
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		→ As per the need of the children.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Yearly by the Women and Child Development Department.
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		- -
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Psycho- Social Care for Women and Children
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Health ★ Police ★ Information and publicity Department ★ NGO's Working for Children
Suggestion of CWC/Inspection Committee		★ Suggesting the case and protection of the children.
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities		★ JJ Act ★ Counseling ★ Computer Training.

<b>KARNATAKA/09/GO/49</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Govt. Children Home for Boys (Sr), Bijapur	
Contact Details				
a) Name of Superintendent/Secretary			G.R.Koti	
b) Address			Children Home for Boys (Sr)	
c) Phone			08352- 277126	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			1979	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			200	
b) Present Strength			89	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	50	50
d)	15-18 years	-	39	39
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	30	30
d)	1-2 years	-	22	22
e)	2-3 years	-	12	12
f)	3-4 years	-	25	25
g)	4-5 years	-	-	-
h)	More than 5 Years	-	89	89
Number of "Children with special needs" in the home				

S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Single Eye)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Shelter, Clothing, Education and Sports.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution			-		
a)	by Juvenile Justice Board	-			
b)	by Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	28	10*10	4	3
b)	Classrooms	2	-	-	-
c)	Sick room/ First Aid Room	1	10*10	4	-
d)	Kitchen	1	12*20	-	-
e)	Dinning Hall	1	12*50	100	89
f)	Recreation room	1	20*80	200	89
g)	Library	1	10*20	20	-
h)	Counselling & Guidance room	1	10*10	4	-
i)	Office rooms	3	12*40	19	13
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	1	10*20	-	-
n)	Play Ground	1	100*200	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				250*500 Sq Ft	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					
S. No	Details of Staff	Sanctioned	Actual	Educational	Salary / Associate



		Strength	Strength	Qualification	Honorarium per month	Salary paid with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A.	24,970	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	-	-
d)	Case Worker	1	1	B.A.	24,305	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	S.S.L.C.	21,081	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	2	-	-	-	-
p)	Helper	--	-	-	-	-
q)	Sweeper	1	1	-	12,918	-
r)	Any other	-	-	-	-	-
	Total	8	5	-	208,434	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		By Order of C.W.C.
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		Individual, Social Economical, Educational, Cultural,etc
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>

j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two Times	
What types of special diet is provided for sick infant or children		Depends upon the doctor's advice.	
How many cooks are there		-	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	1	3 Years
c)	School Uniform	2	Year
d)	Under garments	4	Year
e)	Towel	2	Year
f)	Durry	1	3 Years
g)	Pillow	1	3 Years
h)	Shoes/ Chappal	1	5 Years
i)	Blanket	1	Year
j)	Tooth powder/paste	1200 gm	Year
k)	Soap	-	-
l)	Oil	1260 gm	Year
m)	Utensils (Plates and Glasses)	5 Sets	For 5 Years
<b>EDUCATION</b>			
Whether educational facilities are available for children		No	
Are any of the educational facilities available within the institution			

S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	√
b)	Primary	-	√
c)	Secondary	-	√
d)	Higher	-	√
e)	Non-formal classes	-	√
f)	Private coaching	√	-
g)	Bridge Course	-	√
h)	Any other-- Tuition	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	29	29	-	Govt.	½ km	Walk
c)	Secondary	49	49	-	Private	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students

No

If Yes, then how much per child month

-

Whether the educational facilities are adequate for children

Yes

If No, what are the other facilities required

Indoor, outdoor games

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children

No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-

Whether instructors are trained

No

If Yes, details of qualification

-

Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		No	
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	-	Weekly
c)	Music	-	-
d)	Television	√	Weekly
e)	Picnic	√	Yearly
f)	Outings	-	-
g)	Cultural Programme	√	Monthly
h)	Yoga	-	-
i)	Debates	√	Weekly
j)	Radio	√	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		6:00 p.m. to 7:00 p.m.	
What types of books provide for Children		Story books, Story of National Leaders	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	No	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	No	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	No	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		For Cultural and social Activities.	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		By the trained staff	

Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes, a) Number of Training Programmes organized	One
b) Details of Training Programmes	Interaction with children, convince to maintain discipline
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Psycho, Social Care for Women and Children
<b>Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities</b>	
	★ Local Government Institutions and Local NGOs
<b>Suggestion of CWC/Inspection Committee</b>	
	★ To maintain Cleanliness
<b>Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities</b>	
	★ Areas Institutional Services.

<b>KARNATAKA/10/GO/50</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Govt. Juvenile Home for Boys, Davangere (di)	
Contact Details				
a) Name of Superintendent/Secretary			Geetha palankar	
b) Address			M.C.C.B. Block	
c) Phone			08192-221471	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			1960	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			71	
Number of Children lodged in the home having families residing in the same State/UT			71	
Reasons for staying in the home in case of children having families (provide details)			Poor Condition, Family Problem, Unfit for the healthy	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	8	8
c)	10-15 years	-	42	42
d)	15-18 years	-	16	16
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	1	1
b)	4-6 month	-	2	2
c)	6-12 month	-	6	6
d)	1-2 years	-	10	10
e)	2-3 years	-	14	14
f)	3-4 years	-	11	11
g)	4-5 years	-	10	10
h)	More than 5 Years	-	12	12
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Single Eye)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Care and Protection Service, Sports Cultural Activities.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			No		
Whether the Institution is certified as Fit Institution			Yes		
a)	by Juvenile Justice Board	-			
b)	by Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	3.00	-	-
b)	Classrooms	3	4.00	50	50
c)	Sick room/ First Aid Room	1	1.925	-	-
d)	Kitchen	1	3.80	-	-
e)	Dinning Hall	1	3.80	50	70
f)	Recreation room	-	-	-	-
g)	Library	1	2.36	-	-
h)	Counselling & Guidance room	1	3.00	-	-
i)	Office rooms	1	3.90	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	7	-	-	-
l)	Separate Latrines for boys and girls	12	-	-	-
m)	Store room	1	2.36	-	-
n)	Play Ground	1	16	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				3 Acre	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				No	
<b>MANPOWER OF CHILDREN HOME</b>					
S. No	Details of Staff	Sanctioned	Actual	Educational	Salary / Associate

		Strength	Strength	Qualification	Honorarium per month	Worked with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	Degree	19,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	M.S.W.	8,000	-
d)	Case Worker	1	1	Degree	16,000	-
e)	Doctor (Part time or Full time)	3	3	M.B.B.S.	1,000 Part Time	-
f)	Paramedical Staff	1	-	Nursing	10,000	-
g)	Educator	4	2	B. Ed.	12,000	-
h)	Vocational Instructor	-	-	-	-	-
i)	Deputy Superintendent cum Accountant	1	1	Degree	13,000	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	1	-	C.P.E.D.	12,000	-
l)	Driver	1	1	P.U.C.	11,000	-
m)	Cook	2	-	7 <sup>th</sup>	8,000	-
n)	House Aunty	2	2	P.U.C.	11,000	-
o)	Security Guard	1	1	7 <sup>th</sup>	8,000	-
p)	Helper	1	1	7 <sup>th</sup>	7,500	-
q)	Sweeper	1	1	7 <sup>th</sup>	7,500	-
r)	Any other Security Staff	-	3	7 <sup>th</sup>	5,000	-
	Total	20	17	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		Counseling of Child
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>



i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		No	
Whether ambulance facility is available for patients		No	
Any other Facilities		No	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three Times	
What types of special diet is provided for sick infant or children		Idli, Sweets, Chapatti, milk and Curds, etc.	
How many cooks are there		-	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Pillow	-	-
h)	Shoes/ Chappal	-	-
i)	Blanket	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plates and Glasses)	-	-
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	

Are any of the educational facilities available within the institution							
S.No	Formal School on Premises				Yes	No	
a)	Pre-school				√	-	
b)	Primary				√	-	
c)	Secondary				-	√	
d)	Higher				-	√	
e)	Non-formal classes				-	√	
f)	Private coaching				-	√	
g)	Bridge Course				-	√	
h)	Any other				-	-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	5	5	-	-	-	-
b)	Primary	19	19	-	Private	1 km	Walk
c)	Secondary	18	18	-	Private	1 km	Walk
d)	Higher	27	27	-	Private	1 km	Walk
e)	Non-formal classes	5	5	-	Govt.	3 km	Walk
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						No	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						-	
VOCATIONAL TRAINING							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/mobile repairing	15	-	15	6 Months		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					Yes		

If Yes, details of qualification		-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		No	
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		-	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	√	Monthly
c)	Music	√	Daily
d)	Television	√	Daily
e)	Picnic	√	Yearly
f)	Outings	√	Monthly
g)	Cultural Programme	√	Weekly
h)	Yoga	√	Daily
i)	Debates	√	Monthly
j)	Radio	√	Daily
k)	Any Other	√	Daily
<b>LIBRARY</b>			
Whether library facilities are available or not		No	
If Yes, Opening timing or day		N.A.	
What types of books provide for Children		N.A.	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No	
What type of Co-operation and Co-ordination has been received for homes		No	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of		-	

homes	
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	-

<b>KARNATAKA/11/GO/51</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Amulya Shishu Greh, Gulbarga	
Contact Details				
a) Name of Superintendent/Secretary			Smt. Papamma.S.Habalkar	
b) Address			Aland Road, Gulbarga	
c) Phone			08472-244756	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Shishu Greh(Boys)</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			2005	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			10	
b) Present Strength			7	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	5	2	7
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	4	1	5
b)	4-6 month	-	2	2
c)	6-12 month	1	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys			
a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (Single Eye)	-	-	-		
What are the facilities and support services provided for the children staying in Home				-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				No		
Any other registration				-		
Whether the Institution is certified as Fit Institution				Yes		
a)	by Juvenile Justice Board			-		
b)	by Child Welfare Committee			√		
If Yes, Please Specify the Facilities provided				-		
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned			√		
b)	Rented			-		
c)	Lease			-		
d)	Donated			-		
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	-	-	-	-	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	-	-	-	-	
e)	Dinning Hall	-	-	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	-	-	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	-	-	-	-	
l)	Separate Latrines for boys and girls	-	-	-	-	
m)	Store room	-	-	-	-	
n)	Play Ground	-	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				No		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorar	Associate d with the

					-um per month	Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	1	1	M.S.W.	5,500	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	3,000	-
f)	Paramedical Staff	1	1	-	5,500	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Deputy Superintendent cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	4	4	-	2,000	-
q)	Sweeper	-	-	-	-	-
r)	Any other	-	-	-	-	-
	Total	8	7	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Abonded and Surrender
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		-
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	-
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	-
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	

Grade Book (Health Charts)		√	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		First Aid Box and referring to Government Hospital for immediate treatment.	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other – Private Hospital	√	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		-	
What types of special diet is provided for sick infant or children		As suggested by Doctor.	
How many cooks are there		-	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Pillow	-	-
h)	Shoes/ Chappal	-	-
i)	Blanket	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plates and Glasses)	-	-
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	



Are any of the educational facilities available within the institution							
S.No	Formal School on Premises				Yes	No	
a)	Pre-school				-	-	
b)	Primary				-	-	
c)	Secondary				-	-	
d)	Higher				-	-	
e)	Non-formal classes				-	-	
f)	Private coaching				-	-	
g)	Bridge Course				-	-	
h)	Any other				-	-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					No		

If Yes, details of qualification		-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		-	
Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	-	-
b)	Outdoor games	-	-
c)	Music	-	-
d)	Television	-	-
e)	Picnic	-	-
f)	Outings	-	-
g)	Cultural Programme	-	-
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		No	
If Yes, Opening timing or day		-	
What types of books provide for Children		-	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	-	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		Need of the Children	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of		-	

homes	
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	Yearly, by the Department
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Social Worker Orientation Training
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Health Department</li> <li>★ Police Department</li> <li>★ Information and Publicity Department</li> <li>★ NGOs working for Children</li> <li>★ Care and Protection</li> </ul>
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ Detention Order</li> <li>★ Legally free for Adoption</li> <li>★ Suggesting the Care and Protection of the Children</li> </ul>
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ JJ Act</li> <li>★ Adoption</li> </ul>

<b>KARNATAKA/12/GO/52</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>		Juvenile Home for Boys		
<b>Contact Details</b>				
a) Name of Superintendent/Secretary		Mrs. Revathi S. Hosmath		
b) Address		Shivaji Nagar, Khanapur, Dist. Belgaun, Karnataka		
c) Phone		08336-222272		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		State Govt. (Department of Women and Child Development)		
Year of Establishment of the Home		1956		
Supported by		State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
<b>Number of inmates</b>				
c) Capacity		100		
d) Present Strength		40		
Number of Children lodged in the home having families residing in the same State/UT		35		
Reasons for staying in the home in case of children having families (provide details)		-		
<b>Age breakup of children</b>				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	28	28
d)	15-18 years	-	12	12
<b>Details of Stay of Children in the home</b>				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	2	2
b)	4-6 month	-	1	1
c)	6-12 month	-	15	15
d)	1-2 years	-	-	-
e)	2-3 years	-	7	7
f)	3-4 years	-	4	4
g)	4-5 years	-	-	-
h)	More than 5 Years	-	1	1
<b>Number of "Children with special needs" in the home</b>				
S.No.	Category	Number of Children		Total

		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Single Eye)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Clothing, Bedding, Education, Health, Shelter, Care and Protection		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution			Yes		
c)	by Juvenile Justice Board		-		
d)	by Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			Care and Protection, Shelter, Food, Clothing, Bedding, Education, Health.		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		√		
b)	Rented		-		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	30 * 20	2	1
b)	Classrooms	2	10 * 10	6	2
c)	Sick room/ First Aid Room	1	10 * 10	1	1
d)	Kitchen	1	15 * 20	1	1
e)	Dinning Hall	1	40 * 20	1	1
f)	Recreation room	-	-	1	-
g)	Library	1	10 * 10	1	1
h)	Counselling & Guidance room	-	10 * 10	1	1
i)	Office rooms	1	20 * 10	1	1
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	6	4 * 3	10	6
l)	Separate Latrines for boys and girls	6	4 * 3	10	6
m)	Store room	1	10 * 10	1	1
n)	Play Ground	1	2 Acres	1	1
o)	Vocational Training Centre	-	10 * 10	2	1
Total area of the Campus (Sq. ft.)				4 Acres (1,85,600 Sq. ft)	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M. H.Sc.	23,734	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	MSW	8,000	-
d)	Case Worker	1	1	M. H. Sc.	23,734	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	1,000	-
f)	Paramedical Staff	1	1	A.N.M.	17,443	-
g)	Educator	3	3	M.A. M. Ed.	19,549	-
h)	Vocational Instructor	-	-	-	-	-
i)	Deputy Superintendent cum Accountant	1	1	B.A.	20,325	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	S.S.L.C.	2,800	-
n)	House Aunty	1	1	S.S.L.C.	10,940	-
o)	Security Guard	3	3	S.S.L.C.	3,200	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	S.S.L.C.	9,461	-
r)	Any other					
	SDA	1	1	S.S.L.C.	14,559	-
	Peon	1	1	S.S.L.C.	11,620	-
	Total	16	16	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Selection by CWC Belgaun	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
What kind of information you have collected from children					Social Investigator, Family Background and case History	
Maintenance of Registers/Record Maintenance						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register				<input checked="" type="checkbox"/>	
b)	Individual Care Plan				<input checked="" type="checkbox"/>	
c)	Supervision register				<input checked="" type="checkbox"/>	
d)	Medical file or medical report				<input checked="" type="checkbox"/>	
e)	Nutrition diet file				<input checked="" type="checkbox"/>	

f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Regular Health Check-Up, Health Camps, Hygiene and Sanitation Camps, Eye Camps and Dental Checkups.	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		8:00 A.M. to 6:00 P.M.	
Frequency of Doctor's visit		4 times in a month.	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other – Private Hospital	-	
How many children are suffering from communicable diseases and HIV/AIDS		N.A.	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As suggested by Doctor.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	1	2 Year
c)	School Uniform	2	Yearly
d)	Under garments	-	-
e)	Towel	2	Yearly
f)	Durry	1	3 Year
g)	Pillow	1	2 Year
h)	Shoes/ Chappal	1	2 Year
i)	Blanket	1	Yearly

j)	Tooth powder/paste	1	Monthly
k)	Soap	150 gm	Monthly
l)	Oil	100 gm	Monthly
m)	Utensils (Plates and Glasses)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	√	-
f)	Private coaching	√	-
g)	Bridge Course	√	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	10	10	-	Govt.	1 km	By Walk
c)	Secondary	25	25	-	Govt.	1 km	By Walk
d)	Higher	4	4	-	Govt.	1 km	By Walk
e)	Non-formal classes	1	1	-	Govt.	1 km	By Walk
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children No

If No, what are the other facilities required

Teaching Aids,  
Science Charts,  
Geometrical  
Equipments etc.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	40	-	40	3 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/	40	-	40	3 Months



	mobile repairing				
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other		-		-
Whether instructors are trained				Yes	
If Yes, details of qualification				M.A. M. Ed.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Weekly	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Occasionally	
h)	Yoga	-		-	
i)	Debates	√		Yearly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				8:00 A.M. to 8:00 P.M.	
What types of books provide for Children				General Knowledge, Competitive Story Books, Newspaper, Weekly Magazines.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			No	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	

g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		Network with Police Department for finding missing children.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Counseling and Trainings
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		Yes
If Yes,		
a) Number of Training Programmes organized		3
b) Details of Training Programmes		→ Rights of Children → Care and Protection → ICPS- Programme
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Police Department ★ Labour Department ★ Child Line- NGO
Suggestion of CWC/Inspection Committee		★ Regarding JJ Act (Care and Protection) ★ Rules of JJB.
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities		★ JJ Act ★ Adoption

<b>KARNATAKA/13/GO/53</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>		Juvenile Home for Girls		
Contact Details				
a) Name of Superintendent/Secretary		Smt. Bheema Devi		
b) Address		Chawosh Building, Colatalab, Raichur		
c) Phone		9845188072		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		State Govt. (Department of Women and Child Development)		
Year of Establishment of the Home		1994-95		
Supported by		State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		100		
b) Present Strength		60		
Number of Children lodged in the home having families residing in the same State/UT		-		
Reasons for staying in the home in case of children having families (provide details)		Single Parents and Orphans.		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	11	-	11
c)	10-15 years	33	-	33
d)	15-18 years	14	-	14
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	56	-	56
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	2	-	2	
c)	Physically challenged	-	-	-	
d)	Any other (Tuberculosis)	1	-	1	
What are the facilities and support services provided for the children staying in Home			Food, Clothing, Bedding, Education, Health, Vocational Training.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution			Yes		
a)	by Juvenile Justice Board		-		
b)	by Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		-		
b)	Rented		√		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	1	-	-	-
i)	Office rooms	2	-	-	-
j)	Workshops	1	-	-	-
k)	Separate Bathrooms for boys and girls	3	-	-	-
l)	Separate Latrines for boys and girls	1	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				3467 Sq. ft	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					
S. No	Details of Staff	Sanctioned	Actual	Educational	Salary / Associate

		Strength	Strength	Qualification	Honorarium per month	Salary with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.S.W.	11,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	8,000	-
d)	Case Worker	2	-	M.S.W.	-	-
e)	Doctor (Part time or Full time)	1	1	-	1,000	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Deputy Superintendent cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	2,969	-
n)	House Aunty	1	1	-	6,500	-
o)	Security Guard	-	2	-	2,669	-
p)	Helper	1	-	-	-	-
q)	Sweeper/Peon	1	1	-	-	-
r)	Any other					
	SDA	1	1	B.A.	9,275	-
	FDA	1	1	S.S.L.C.	6,120	-
	Total	11	10	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		Primary Enquiry and Home Enquiry Report
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input type="checkbox"/>
c)	Supervision register	<input type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>

h)	Case file	√	
i)	Inquiry report file	-	
j)	Stock register	√	
k)	Any other(Please Specify) Entry Register, Moment Register	√	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other – Private Hospital	-	
How many children are suffering from communicable diseases and HIV/AIDS		4	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Pillow	-	-
h)	Shoes/ Chappal	-	-
i)	Blanket	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plates and Glasses)	-	-

<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
S.No.	Formal School on Premises	Yes			No		
a)	Pre-school	-			-		
b)	Primary	-			-		
c)	Secondary	-			-		
d)	Higher	-			-		
e)	Non-formal classes	-			-		
f)	Private coaching	-			-		
g)	Bridge Course	-			-		
h)	Any other	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	18	-	18	Govt.	½ km	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	14	-	14	Govt.	½ km	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other- College	3	-	3	Govt.	½ km	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	5	5	3 Months		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		

n)	Shoes making/leather craft	-	-	-	-
o)	Any other		-		-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	-		-	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Weekly/Monthly	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				General Knowledge and Historical Books.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				No	



What type of Co-operation and Co-ordination has been received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes,	
a) Number of Training Programmes organized	1
b) Details of Training Programmes	→ Functions of CWC, JJB and Child Rights
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	★ Cleaning and Hygiene
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	-

<b>KARNATAKA/14/GO/54</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>		Government Children Home for Girls, Mysore		
Contact Details				
a) Name of Superintendent/Secretary		Geetha Lakshmi		
b) Address		Lalitha Mahal Road, Mysore		
c) Phone		2472576		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		State Govt. (Department of Women and Child Development)		
Year of Establishment of the Home		1959		
Supported by		State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		200		
b) Present Strength		80		
Number of Children lodged in the home having families residing in the same State/UT		-		
Reasons for staying in the home in case of children having families (provide details)		-		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	17	-	17
c)	10-15 years	30	-	30
d)	15-18 years	37	-	37
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
f)	0-4 month	2	-	2
g)	4-6 month	6	-	6
h)	6-12 month	8	-	8
i)	1-2 years	4	-	4
j)	2-3 years	32	-	32
f)	3-4 years	10	-	10
g)	4-5 years	10	-	10
h)	More than 5 Years	6	-	6
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys			
a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (Tuberculosis)	-	-	-		
What are the facilities and support services provided for the children staying in Home			-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No			
Any other registration			-			
Whether the Institution is certified as Fit Institution			-			
c)	by Juvenile Justice Board		-			
d)	by Child Welfare Committee		√			
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned		√			
b)	Rented		-			
c)	Lease		-			
d)	Donated		-			
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	2	46' * 12'	-	77	
b)	Classrooms	4	-	-	-	
c)	Sick room/ First Aid Room	1	18' * 12'	-	-	
d)	Kitchen	1	16' * 15'	-	-	
e)	Dinning Hall	1	47' * 30'	-	-	
f)	Recreation room	1	55' * 17'	-	-	
g)	Library	1	12' * 12'	-	-	
h)	Counselling & Guidance room	1	12' * 12'	-	-	
i)	Office rooms	2	12' * 12'	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	10	6' * 4'	-	-	
l)	Separate Latrines for boys and girls	15	4' * 3'	-	-	
m)	Store room	1	30' * 12'	-	-	
n)	Play Ground	1	40' * 40'	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				2½ Acres		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorar	Associate d with the

					-um per month	Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M. Sc.	18,480	Oct. 2008
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	8,000 (Hon.)	May 2005
d)	Case Worker	2	2	B.A. B. Ed., S.S.L.C.	26,801, 24,331	June 2000, Oct. 2008
e)	Doctor (Part time or Full time)	1	1	M.B.B.S. (M.D.)	1,000 (Hon.)	1996
f)	Paramedical Staff	1	-	-	-	-
g)	Educator	1	1	B.A. B. Ed.	24,662	2008
h)	Vocational Instructor	-	-	-	-	-
i)	Deputy Superintendent cum Accountant	1	1	S.S.L.C.	16,186	May 2005
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	1	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	1	4 <sup>th</sup>	14,155	Jan. 1987
n)	House Aunty	2	2	S.S.L.C.	15,756 12,668	Oct. 2008, June 2006
o)	Security Guard	3	3	4 <sup>th</sup> , S.S.L.C.	4,495 (Hon.)	April 2009
p)	Helper	1	1	7 <sup>th</sup>	12,530	1994
q)	Sweeper	1	1	4 <sup>th</sup>	9,848	2000
r)	Any other → Teacher	3	3	T.C.H.	21,770, 20,133,	July 1995, Aug. 2000
	→ Tutor	2	2	B.A. B. Ed., B. Sc. B. Ed.	2,000 (Hon.)	Oct. 2010
	→ Accountant (S.D.A.)	1	1	B. Sc.	10,121	Dec. 2010
	Total	24	21	-	-	-

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Home Enquires
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
What kind of information you have collected from children	-
Maintenance of Registers/Record Maintenance	

S. No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	$\checkmark$	
c)	Supervision register	$\checkmark$	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	-	
f)	Stock Register	$\checkmark$	
g)	Visitor's book	$\checkmark$	
h)	Case file	$\checkmark$	
i)	Inquiry report file	-	
j)	Stock register	$\checkmark$	
k)	Any other(Please Specify) Menstrual Cycle Register and Scientifically Proved Diet Scale	$\checkmark$	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Primary Health Unit, Visiting Medical Officer's Checkup	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Twice in a Month.	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	$\checkmark$	
b)	Dispensary	$\checkmark$	
c)	Any other – Private Hospital	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		N.A.	
Whether ambulance facility is available for patients		N.A.	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		Bread, Barley Water, Rava Ganji, Rice Ganji, Fruits.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Y
b)	Winter Clothing(Jersey)	1	Y
c)	School Uniform	2	Y
d)	Under garments	4	3M

e)	Towel	2	Y
f)	Durry	-	-
g)	Pillow	1	3Y
h)	Shoes/ Chappal	-	-
i)	Blanket	1	Y
j)	Tooth powder/paste	1	M
k)	Soap	1	M
l)	Oil	-	-
m)	Utensils (Plates and Glasses)	2	2Y

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	√
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	√	-
f)	Private coaching	√	-
g)	Bridge Course	-	√
h)	Any other	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	14	-	14	-	1.5 km	Walk
c)	Secondary	18	-	18	-	1.5 km	Walk
d)	Higher	36	-	36	-	5 km	Bus
e)	Non-formal classes	12	-	12	-	-	-
f)	Any other-	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month N.A.

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	4	4	6 Months
b)	Beauty Culture	-	-	-	-
c)	Computer	-	3	3	6 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-

f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Diploma in tailoring, Tally, Computer Science.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Weekly	
e)	Picnic	√		Every 3 Months	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Occasionally	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other Film Show	√		Every 3 Months	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				10:00 a.m. to 5:30 p.m.	
What types of books provide for Children				Magazines, Newspapers, History, Short Stories, General Knowledge, Autobiography.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	

c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		Skill Development Programmes, Health Checkups, Recreational Programmes, Inspirational Talks.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Regular Visits by Departmental Head, District Heads, C.W.C. , Chair Persons and Members,
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		ATI Mysore, National Law College, Bangalore, DTI Mysore.
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Hospitals
Suggestion of CWC/Inspection Committee		★ Improvement of Educational Status among the Children
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities		★ JJ Act ★ Counseling Training: Child Psychology and Behavioral Problems.



<b>KARNATAKA/15/GO/55</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Government Children Home for Boys (Junior), Takke	
Contact Details				
a) Name of Superintendent/Secretary			Sri V. A. Navadagi	
b) Address			Takke, Bijapur- 586102	
c) Phone			08352-270094	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			1967-68	
Supported by			MWCD and State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			63	
Number of Children lodged in the home having families residing in the same State/UT			8	
Reasons for staying in the home in case of children having families (provide details)			Parents being Handicapped and Parents unable to control their childrens.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	30	30
c)	10-15 years	-	33	33
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	1	1
b)	4-6 month	-	3	3
c)	6-12 month	-	14	14
d)	1-2 years	-	11	11
e)	2-3 years	-	17	17
f)	3-4 years	-	15	15
g)	4-5 years	-	1	1
h)	More than 5 Years	-	1	1
Number of "Children with special needs" in the home				

S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	1	1	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Tuberculosis)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Medical Facilities are provided by district hospital as per medical advice.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution			-		
a)	by Juvenile Justice Board		-		
b)	by Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		√		
b)	Rented		-		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	1860	100	63
b)	Classrooms	2	360	-	-
c)	Sick room/ First Aid Room	1	120	-	-
d)	Kitchen	1	360	-	-
e)	Dinning Hall	1	360	-	-
f)	Recreation room	1	1080	-	-
g)	Library	1	360	-	-
h)	Counselling & Guidance room	1	720	-	-
i)	Office rooms	2	300	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	3	-	-	-
l)	Separate Latrines for boys and girls	3	-	-	-
m)	Store room	1	360	-	-
n)	Play Ground	2	1000	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				8 Acres	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.B.A. (LLB)	27,666	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	8,000	-
d)	Case Worker	1	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	1	1	S.S.L.C., A.N.M.	15,341	-
g)	Educator	2	2	S.S.L.C., T.C.H.	23,808, 20,733	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store Keeper cum Accountant	1	1	B.A.	12,836	-
j)	Music Teacher	1	1	S.S.L.C.	13,683	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	-	4,141	-
m)	Cook	1	1	7 <sup>th</sup>	13,113	-
n)	House Aunty	2	2	S.S.L.C.	12,863, 10,675	-
o)	Security Guard	3	3	-	3,692	-
p)	Helper	1	1	7 <sup>th</sup>	13,700	-
q)	Sweeper	1	1	-	8,994	-
r)	Any Other → Dhobi → Head Master	1 1	1 -	- -	3649.30 -	- -
	Total	19	17	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		As per JJ Act,2000
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
What kind of information you have collected from children		Social, Economical and General.
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	-
d)	Medical file or medical report	<input checked="" type="checkbox"/>

e)	Nutrition diet file	-	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	-	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		First Aid, Indoor/ Outdoor Patient Treatment	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		9:00 a.m., 7 Hours	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other – Private Hospital	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As per Doctor's advise	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	-
b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	1	-
d)	Under garments	4	-
e)	Towel	2	-
f)	Durry	1	3Y
g)	Pillow	1	3Y
h)	Shoes/ Chappal	1	Y
i)	Blanket	1	Y
j)	Tooth powder/paste	100 gm	M

k)	Soap		100 gm	M			
l)	Oil		90 gm	M			
m)	Utensils (Plates and Glasses)		-	-			
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes				
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	-			
b)	Primary		√	-			
c)	Secondary		√	-			
d)	Higher		-	-			
e)	Non-formal classes		-	-			
f)	Private coaching		-	-			
g)	Bridge Course		-	-			
h)	Any other		-	-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	43	43	-	Govt.	-	-
c)	Secondary	20	20	-	Govt.	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other-	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		

k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other		-		-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	-		-	
i)	Debates	√		-	
j)	Radio	√		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				After School Hours.	
What types of books provide for Children				Moral Stories, Cultural, Historical etc.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What type of Co-operation and Co-ordination has been received for homes	Medical Examination, Sports and Cultural Activities.
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes,	
a) Number of Training Programmes organized	1
b) Details of Training Programmes	→ Psycho Social Care → Maintenance of Home
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Psycho Social Care and Maintenance of Home.
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Deputy Director of Public Instruction (DDPI)</li> <li>★ Health and Family Welfare Department</li> <li>★ Rotary Club</li> <li>★ Inner Wheel</li> <li>★ Other NGO</li> </ul>
Suggestion of CWC/Inspection Committee	-
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ Psycho Social Care</li> <li>★ Maintenance of Registers and Institution</li> <li>★ Quality Care of Children</li> </ul>

<b>KARNATAKA/16/GO/56</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Government Balmandira for Boys	
Contact Details				
a) Name of Superintendent/Secretary			A.B. Munniyappanuer	
b) Address			Takke, Bijapur- 586102	
c) Phone			02372061	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			2007-08	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			26	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	7	7
c)	10-15 years	-	12	12
d)	15-18 years	-	7	7
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	3	3
b)	4-6 month	-	4	4
c)	6-12 month	-	5	5
d)	1-2 years	-	2	2
e)	2-3 years	-	4	4
f)	3-4 years	-	8	8
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-



b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (Tuberculosis)	-	-	-		
What are the facilities and support services provided for the children staying in Home			-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No			
Any other registration			-			
Whether the Institution is certified as Fit Institution			-			
a)	by Juvenile Justice Board	-				
b)	by Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided			As per State Government provisions.			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	3	12' * 10'	100	26	
b)	Classrooms	2	15' * 10'	-	-	
c)	Sick room/ First Aid Room	1	10' * 10'	-	-	
d)	Kitchen	1	15' * 12'	-	-	
e)	Dinning Hall	1	12' * 12'	-	-	
f)	Recreation room	1	15' * 10'	-	-	
g)	Library	1	15' * 15'	-	-	
h)	Counselling & Guidance room	1	12' * 10'	-	-	
i)	Office rooms	1	10' * 10'	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	5	7' * 5'	-	-	
l)	Separate Latrines for boys and girls	5	4' * 9'	-	-	
m)	Store room	1	12' * 10'	-	-	
n)	Play Ground	1	40' * 100*	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				3 Acres		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/

						Year)
a)	Superintendent/ Project Manager	1	1	M.A.	23,678	Jan 2011
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	S.S.L.C.	16,858	-
d)	Case Worker	1	1	B.A.	23,728	-
e)	Doctor ( <b>Part time</b> )	1	1	M.B.B.S. (M.D.)	1,000	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store Keeper cum Accountant	1	1	S.S.L.C.	10,639	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	S.S.L.C.	2,000	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	1	1	4 <sup>th</sup>	2,000	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	2	7 <sup>th</sup>	12,093	-
r)	Any Other	-	-	-	-	-
	Total	9	9	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Through CWC
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
What kind of information you have collected from children	-
Maintenance of Registers/Record Maintenance	
S. No.	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register
b)	Individual Care Plan
c)	Supervision register
d)	Medical file or medical report
e)	Nutrition diet file
f)	Stock Register
g)	Visitor's book
h)	Case file
i)	Inquiry report file
j)	Stock register
k)	Any other(Please Specify)

#### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Three times in a week	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other – Private Hospital	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		Yes	
Whether ambulance facility is available for patients		-	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		-	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		-	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	2	Y
d)	Under garments	-	-
e)	Towel	4	Y
f)	Durry	-	-
g)	Pillow	1	Y
h)	Shoes/ Chappal	1	Y
i)	Blanket	1	3Y
j)	Tooth powder/paste	150 gm	M
k)	Soap	150 gm	M
l)	Oil	150 gm	M
m)	Utensils (Plates and Glasses)	1 set	Y
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			
S.No	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	√	-

c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other → Tutor	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	11	11	-	-	½ km	By Walk
c)	Secondary	-	-	-	-	-	-
d)	Higher	11	11	-	-	½ km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any Other	4	4			½ km	By Walk

Whether the institution is providing any pocket money for out going students

No

If Yes, then how much per child month

-

Whether the educational facilities are adequate for children

-

If No, what are the other facilities required

-

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children

No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other		-		-

Whether instructors are trained

No

If Yes, details of qualification

-

Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course

-

Difficulty (if any)

-

<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available			Yes
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Weekly
b)	Outdoor games	√	Weekly
c)	Music	-	-
d)	Television	√	Weekly
e)	Picnic	√	Weekly
f)	Outings	-	-
g)	Cultural Programme	√	Weekly
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	√	Weekly
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not			Yes
If Yes, Opening timing or day			Evening
What types of books provide for Children			Magazines, Story Books and Newspapers.
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	No	
d)	Arrangements for disposal of garbage	No	
e)	Protection from mosquitoes	No	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	No	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc			Yes
What type of Co-operation and Co-ordination has been received for homes			SATHI
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes			-
Whether any specific evaluation of the Organization/Institution has been conducted in the past			No

If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes,	
a) Number of Training Programmes organized	2
b) Details of Training Programmes	→ Regarding JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Attended three days workshops at dhoowed.
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	-

<b>KARNATAKA/17/GO/57</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Government Children home for Boys, Chitradurga	
Contact Details				
a) Name of Superintendent/Secretary			A.M. Astheer	
b) Address			Zilla Panchayat Road, Chitradurga.	
c) Phone			08194-224768	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			2000	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
c) Capacity			50	
d) Present Strength			19	
Number of Children lodged in the home having families residing in the same State/UT			14	
Reasons for staying in the home in case of children having families (provide details)			Single Parent and Poverty	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	3	3
c)	10-15 years	-	15	15
d)	15-18 years	-	1	1
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	2	2
b)	4-6 month	-	1	1
c)	6-12 month	-	2	2
d)	1-2 years	-	1	1
e)	2-3 years	-	2	2
f)	3-4 years	-	3	3
g)	4-5 years	-	1	1
h)	More than 5 Years	-	7	7
Number of "Children with special needs" in the home				

S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Tuberculosis)	-	-	-	
What are the facilities and support services provided for the children staying in Home			→ Food, accommodation and education provided to all the children. → Financial assistance given to guardian under sponsorship programme		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution			-		
a)	by Juvenile Justice Board	-			
b)	by Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	1000	50	19
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	225	-	-
d)	Kitchen	1	700	-	-
e)	Dinning Hall	1	600	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	1	225	-	-
i)	Office rooms	2	225	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	6	350	-	-
l)	Separate Latrines for boys and girls	8	250	-	-
m)	Store room	1	225	-	-
n)	Play Ground	1	2000	-	-
o)	Vocational Training Centre	-	-	-	-



Total area of the Campus (Sq. ft.)					1 Acre	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	25,050	2003
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor ( <b>Part time</b> )	1	1	M.B.B.S.	1,000	2006
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store Keeper cum Accountant	1	1	P.U.C.	11,604	2001
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	7 <sup>th</sup>	5,000	-
n)	House Aunty	1	1	B. Sc.	10,856	2004
o)	Security Guard	-	3	7 <sup>th</sup>	15,000	-
p)	Helper	1	1	S.S.L.C.	9,444	2002
q)	Sweeper	1	1	S.S.L.C.	5,000	-
r)	Any Other	-	-	-	-	-
	Total	8	10	-	82,954	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Orphan, neglected, missing and poor children	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
What kind of information you have collected from children					Socio- economic condition of child.	
Maintenance of Registers/Record Maintenance						
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>				
a)	Admission and discharge register	<input checked="" type="checkbox"/>				
b)	Individual Care Plan	<input checked="" type="checkbox"/>				
c)	Supervision register	<input checked="" type="checkbox"/>				
d)	Medical file or medical report	<input checked="" type="checkbox"/>				

e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify) → Attendance register of children	√

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Health Checkup.
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	No
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other – Private Hospital	-
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for such children	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	As per the recommendation of the doctor
How many cooks are there	One
Whether children are helping at the time of cooking in any way	Yes
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Y
b)	Winter Clothing(Jersey)	1	3Y
c)	School Uniform	2	Y
d)	Under garments	4	Y
e)	Towel	2	Y
f)	Durry	-	-
g)	Pillow	1	Y
h)	Shoes/ Chappal	2	Y
i)	Blanket	1	3Y
j)	Tooth powder/paste	90 gm	M

k)	Soap		150 gm	M			
l)	Oil		80 gm	M			
m)	Utensils (Plates and Glasses)		1 set	Y			
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes				
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	-			
b)	Primary		-	-			
c)	Secondary		-	-			
d)	Higher		-	-			
e)	Non-formal classes		-	-			
f)	Private coaching		√	-			
g)	Bridge Course		-	-			
h)	Any other → Drawing and Painting		√	-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	12	12	-	Private	1 km	By Walk
c)	Secondary	6	6	-	Private	$\frac{3}{4}$ km	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any Other Diploma Courses	1	1	-	Govt.	40 km	By Bus
Whether the institution is providing any pocket money for outgoing students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				N.A.	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				N.A.	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	√		Monthly	
f)	Outings	√		Monthly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Story Books and Newspapers	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What type of Co-operation and Co-ordination has been received for homes	Completely support from State government
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	01-09-2006 and 02-09-2006 By UNICEF
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes, a) Number of Training Programmes organized	1
b) Details of Training Programmes	→ How to treat the children
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	→ NIPCCD → NIMHANS
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Police ★ Health
Suggestion of CWC/Inspection Committee	-
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	★ Child Psychology ★ Stress Management ★ Rapport building ★ Intra Personal Adjustments

<b>KARNATAKA/18/GO/58</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Children Home for Girls, Gulbarga	
Contact Details				
a) Name of Superintendent/Secretary			Smt. Suryachandargiri	
b) Address			Aland Road, Gulbarga	
c) Phone			-	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			2008	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			50	
b) Present Strength			5	
Number of Children lodged in the home having families residing in the same State/UT			5	
Reasons for staying in the home in case of children having families (provide details)			Children in need of Care and Protection	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	1	-	1
b)	5-10 years	1	-	1
c)	10-15 years	1	-	1
d)	15-18 years	2	-	2
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	1	-	1
b)	4-6 month	-	-	-
c)	6-12 month	1	-	1
d)	1-2 years	1	-	1
e)	2-3 years	2	-	2
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys		
a)	Mentally challenged	5	-	5	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (Tuberculosis)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Clothing, Bedding, Education, Medical Care and Rehabilitation		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution			-		
a)	by Juvenile Justice Board		-		
b)	by Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			Food, Clothing, Bedding, Education, Residential Support, Medical Care and Rehabilitation		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		-		
b)	Rented		-		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	1	-	-	-
l)	Separate Latrines for boys and girls	1	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient				No	

ventilation and Light						
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Degree	11,400	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	1	1	S.S.L.C.	14,050	-
e)	Doctor ( <b>Part time</b> )	-	-	-	-	-
f)	Paramedical Staff	1	-	-	10,000	-
g)	Educator	1	1	T.C.H.	6,250	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store Keeper cum Accountant	1	1	S.S.L.C.	5,800-10,500	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	-	-	-	-
m)	Cook	1	-	-	-	-
n)	House Aunty	1	1	S.S.L.C.	5,800-10,500	-
o)	Security Guard	4	-	-	-	-
p)	Helper	4	-	-	-	-
q)	Sweeper	1	-	-	-	-
r)	Any Other Dhobi	1	-	B.Com.	-	-
	Total	18	5	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					-	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
What kind of information you have collected from children					Family Information, Ration Card, death Certificate, Photos and Mark Sheets.	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>				
a)	Admission and discharge register	<input checked="" type="checkbox"/>				
b)	Individual Care Plan	<input checked="" type="checkbox"/>				
c)	Supervision register	<input checked="" type="checkbox"/>				
d)	Medical file or medical report	<input checked="" type="checkbox"/>				



e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		First Aid Box and refer to government hospital for treatment	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other – Private Hospital	√	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As suggests by doctor	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	1	Y
f)	Durry	-	-
g)	Pillow	1	Y
h)	Shoes/ Chappal	-	-
i)	Blanket	1	Y
j)	Tooth powder/paste	1	M

k)	Soap		1	M			
l)	Oil		150 gm	M			
m)	Utensils (Plates and Glasses)		1 set	2 Y			
<b>EDUCATION</b>							
Whether educational facilities are available for children		-					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	√			
b)	Primary		-	√			
c)	Secondary		-	√			
d)	Higher		-	√			
e)	Non-formal classes		√	-			
f)	Private coaching		-	√			
g)	Bridge Course		-	√			
h)	Any other		-	√			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any Other	-	-	-	-	-	-
Whether the institution is providing any pocket money for outgoing students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						-	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		

l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	-		-	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			No	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other				Yes	

Govt., NGOs etc	
What type of Co-operation and Co-ordination has been received for homes	According to the need of children
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	Women and Child Development Department
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	Yearly By Department
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Psycho- Social Care of Women and Children
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Health</li> <li>★ Police</li> <li>★ Information of Public Department</li> <li>★ NGOs working for children and Care and protection.</li> </ul>
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ Suggesting the Care and Protection of children</li> </ul>
<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ JJ Act</li> <li>★ Counseling</li> </ul>

<b>KARNATAKA/19/GO/59</b>				
<b>Profile of Child Care Institution</b>				
<b>Name of Child Care Institution</b>			Govt. Children Home for Boys	
Contact Details				
a) Name of Superintendent/Secretary			Sri Rajendra Prasat	
b) Address			Dr. M.H. Mari Gowda Road, Bangalore-560029	
c) Phone			08026561226	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home and After Care Home (Boys)</b>	
Run by			State Govt. (Department of Women and Child Development)	
Year of Establishment of the Home			1995	
Supported by			State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
c) Capacity			300	
d) Present Strength			115	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Runaway, Single Parents, Child labour and deaf and dumb.	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	18	18
c)	10-15 years	-	58	58
d)	15-18 years	-	39	39
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	93	93
b)	4-6 month	-	13	13
c)	6-12 month	-	5	5
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	4	4
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	5	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other → Deaf and Dumb	-	4	4	
What are the facilities and support services provided for the children staying in Home			Food, Shelter, Health, Clothing, Formal and Informal Education, Training, Sports, Entertainment, Picnic and Film Show.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution			-		
a)	by Juvenile Justice Board		-		
b)	by Child Welfare Committee		√		
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned		√		
b)	Rented		-		
c)	Lease		-		
d)	Donated		-		
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	25 * 48	-	-
b)	Classrooms	7	24 * 16	-	-
c)	Sick room/ First Aid Room	1	24 * 16	-	-
d)	Kitchen	1	32 * 25	-	-
e)	Dinning Hall	1	56 * 30	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	25 * 40	-	-
h)	Counselling & Guidance room	1	25 * 16	-	-
i)	Office rooms	2	24 * 16	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	1	25 * 16	-	-
l)	Separate Latrines for boys and girls	2	25 * 16	-	-
m)	Store room	1	25 * 16	-	-
n)	Play Ground	2	-	-	-
o)	Vocational Training Centre	4	25 * 48	-	-

Total area of the Campus (Sq. ft.)					30200	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes0	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M. Com.	25,420	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	Master Degree	8,000	-
d)	Case Worker	4	4	Degree	25,816 22,850 25,816 27,300	-
e)	Doctor	2	1	M.B.B.S.	39,795	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	6	1	-	29,425	-
i)	Store Keeper cum Accountant	1	1	Degree	21,209	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	S.S.L.C.	15,609	-
m)	Cook	4	1	S.S.L.C.	13,319 4,000 4,000 4,000	-
n)	House Aunty	8	7	S.S.L.C.	16,050 14,488 11,059 12,254 11,981 11,075 10,713	-
o)	Security Guard	2	2	S.S.L.C.	13,100 17,202	-
p)	Helper	2	2	-	11,817 10,600	-
q)	Sweeper	1	1	S.S.L.C.	9,044	-
r)	Any Other					
	Office Assistant	1	1	Degree	28,625	-
	Ist Division Assistant	3	3	Degree	22,644	-
	IInd Division	3	3	S.S.L.C.	15,263	-

assistant Teacher	11	6	T.C.H.	25,381	-
Typist	1	0	S.S.L.C.	-	-
Peon	6	5	Group 'D'	17,411	-
Total	58	41	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	No	
If Yes Please mention	-	
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes	
What kind of information you have collected from children	-	
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify) Medical Cash Certificate	<input checked="" type="checkbox"/>

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-	
Does the home have a Medical Care Unit for health check-up of Children	Yes	
If yes, Opening of day, time and duration of MCU	9:00 a.m. to 6:00 p.m.	
Frequency of Doctor's visit	Daily	
Whether any trained Staff for first-aid	Yes	
Referral of Cases		
a)	Govt. Hospital	<input checked="" type="checkbox"/>
b)	Dispensary	-
c)	Any other – Private Hospital	<input checked="" type="checkbox"/>
How many children are suffering from communicable diseases and HIV/AIDS	Nil	
Any specialized services are provided for such children	Yes	
Whether ambulance facility is available for patients	Yes	
Any other Facilities	-	

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Two



What types of special diet is provided for sick infant or children		As suggests by doctor					
How many cooks are there		Three					
Whether children are helping at the time of cooking in any way		Yes					
Whether any Nutrition and Child Development Officer is there		No					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	4			Year		
b)	Winter Clothing(Jersey)	4			Year		
c)	School Uniform	2			Year		
d)	Under garments	4			Year		
e)	Towel	2			Year		
f)	Durry	-			-		
g)	Pillow	1			3 Year		
h)	Shoes/ Chappal	-			-		
i)	Blanket	1			3 Year		
j)	Tooth powder/paste	60 gm			Monthly		
k)	Soap	120 gm			Monthly		
l)	Oil	90 gm			Monthly		
m)	Utensils (Plates and Glasses)	1 set			2 Y		
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.N o	Formal School on Premises	Yes			No		
a)	Pre-school	-			√		
b)	Primary	-			√		
c)	Secondary	-			√		
d)	Higher	-			√		
e)	Non-formal classes	√			-		
f)	Private coaching	-			√		
g)	Bridge Course	-			√		
h)	Any other	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	2	2	-	Govt.	-	Walk
c)	Secondary	2	2	-	Govt.	-	Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any Other → ITI	1	1	-	Govt.	-	walk
Whether the institution is providing any pocket money for outgoing students						No	

If Yes, then how much per child month					N.A.
Whether the educational facilities are adequate for children					Yes
If No, what are the other facilities required					N.A.
<b>VOCATIONAL TRAINING</b>					
Whether the homes have vocational training facilities for children					Yes
If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	12	-	12	4 Months
b)	Beauty Culture	-	-	-	-
c)	Computer	10	-	10	4 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	27	-	27	17 Days
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained					Yes
If Yes, details of qualification					-
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					No
Difficulty (if any)					-
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					Yes
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Weekly	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not					Yes

If Yes, Opening timing or day	10:00 a.m. to 5:30 p.m.	
What types of books provide for Children	Educational Training, Newspaper, Sports and General Knowledge	
<b>SANITATION AND HYGIENE</b>		
Whether Sanitation and Hygiene is maintained in the home through following facilities		
S.No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes	
What type of Co-operation and Co-ordination has been received for homes	-	
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes	-	
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes	
If Yes, when and by whom	By CWC	
Whether CWC members visit your institution regularly	Yes	
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No	
If Yes,		
a) Number of Training Programmes organized	-	
b) Details of Training Programmes	-	
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes	
If Yes, Please specify	From UNICEF at Chennai on “CHILD ABUSE”	
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-	
Suggestion of CWC/Inspection Committee	★ Health and Hygiene	

<b>Mention Areas/issues</b> on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workshops at Institution like NIPCCD to build their capacities	★ Computer Training and Monitoring
---	------------------------------------

*Madhya Pradesh*

<b>MP/01/ NGO/60</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Sewabharti Jabalpur	
Address for Communication	87-C, Near Kachnar City Gate, Phace-II, Vijay Nagar, Jabalpur (M.P.)- 482002	
Telephone (with STD code)	0761-4054673	
Fax	0761-4006919	
Email ID	<a href="mailto:sewabhartijbp@indiatimes.com">sewabhartijbp@indiatimes.com</a>	
Website of Organization	<a href="http://www.sewabhartijabalpur.org">www.sewabhartijabalpur.org</a>	
Type of Child Care Institution being run	Shishu Greh and L.A.P.A.	
Whether run by	NGO	
Name and contact of Chief Functionary	Atit Kumar Tiwari	
Vision of NGO	Health, Education, Child Labour	
Mission of NGO	-	
Key Objectives	Health, Education, Child Labour	
Major Activities	Orphanage, Child Labour Education, Health Camp etc.	
Target group/ Stakeholders	Children	
Geographical location/area	M.P.	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	21-01-1998	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	M.P. Society Registration act, 1973	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
21-01-1998	JJ-3613	Jabalpur
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	Licensed Adoption Placement Agency	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	Under JJ-Act 2000 Article 41(4) and JJ Act 2003 Article 43(2), Registration for Lapa Granted on 12-04-2006	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	No	
Physical Assets of the Organization	Necessary Furniture for Child Labour School and Necessary Equipments for Matrachhaya Shishu Grih	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	36	
Total No. of Professional Staff		
a) Male	13	
b) Female	10	
Total number of		

a) Full Time				31	
b) Part time Staff				5	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
2051576		2665139		2656416	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	-	Cash/Kind	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Matrachhaya Sewabharti Jabalpur		
Contact Details					
a) Name of Superintendent/Secretary			Atit Kumar Tiwari		
b) Address			43 Ekta Nagar, M R -4 Road, Jabalpur (M.P.)		
c) Phone			09425357243		
d) Fax			0761-4006919		
e) Email			Sewabhartijbp.@indiatimes.com		
<b>Type of Institution</b>			<b>Children Home</b>		
Run by			NGO, Sewabharti, Jabalpur		
Year of Establishment of the Home			12-04-2006		
Supported by			-		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			30		
b) Present Strength			17		
Number of Children lodged in the home having families residing in the same State/UT			105		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	12	5	17	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		

a)	0-4 month	4	0	4
b)	4-6 month	0	2	2
c)	6-12 month	2	2	1
d)	1-2 years	1	0	1
e)	2-3 years	1	0	1
f)	3-4 years	3	1	4
g)	4-5 years	1	0	1
h)	More than 5 Years	0	0	0

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	1	1	2
b)	Autism	-	-	-
c)	Physically challenged	-	1	1
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home	Residence, Food, Caretaker, Doctor, Hospital, Education
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960	No
Any other registration	Register Under Society Registration Act 1973 on 21-01-1988 and the registration no is JJ 3613
Whether the Institution is certified as Fit Institution by	
a) Juvenile Justice Board	√
b) Child Welfare Committee	√
If Yes, Please Specify the Facilities provided	Residence, Food, Caretaker, Doctor, Hospital, Education

### INFRASTRUCTURE

Infrastructure available	
a) Owned	-
b) Rented	√
c) Lease	-
d) Donated	-

### Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	1	135	-	-
c)	Sick room/ First Aid Room	1	135	-	-
d)	Kitchen	1	135	-	-
e)	Dinning Hall	1	135	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	240	-	-
j)	Workshops	-	-	-	-



k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	3	135	-	-
m)	Store room	1	85	-	-
n)	Play Ground	1	400	-	-
o)	Vocational Training Centre	1	-	-	-
Total area of the Campus (Sq. ft.)				1400	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	3500	2006
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	1	1	M.A.	-	2006
e)	Doctor (Part time or Full time)	1	1	BAMS	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	M.Com.	-	-
j)	Music Teacher	1	1	10 <sup>th</sup>	2500	2006
k)	Sports/ Yoga Teacher	1	1	B.Com	2500	-
l)	Driver	1	1	10 <sup>th</sup>	3500	2006
m)	Cook	2	2	8 <sup>th</sup>	2000	2006
n)	House Aunty	6	6	-	2500	2006
o)	Security Guard	1	1	-	1500	2006
p)	Helper	2	2	-	1500	-
q)	Sweeper	1	1	-	-	-
r)	Any other					
	→ Sanchalan Pramukh	1	1	B.E. Civil	-	-
	→ Manager	1	1	MBA	-	-
	Total	19	19	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Guidelines issued by C.A.R.A.
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes

If Yes, what kind of information you have collected from children		No information can be collected from the child as there as at the time of admission is generally less than 2 months
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	<input checked="" type="checkbox"/>
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Services of best children hospital of city
Does the home have a Medical Care Unit for health check-up of Children		No
If yes, Opening of day, time and duration of MCU		N.A.
Frequency of Doctor's visit		Daily
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	-
b)	Dispensary	-
c)	Any other – Private Children Hospital	<input checked="" type="checkbox"/>
How many children are suffering from communicable diseases and HIV/AIDS		None
Any specialized services are provided for them		No
If yes, Please provide in details		No
Whether ambulance facility is available for patients		No
Any other Facilities		No
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Five
What types of special diet is provided for sick infant or children		As per the advise of doctor
How many cooks are there		Two
Whether children are helping at the time of cooking in any way		No
Whether any Nutrition and Child Development Officer is there		No
<b>CLOTHING AND BEDDING</b>		
How many sets of clothes, bedding and other articles are given to children		

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	6	Year
b)	Winter Clothing(Jersey)	3	Year
c)	School Uniform	2	Year
d)	Under garments	12	Year
e)	Towel	1	Year
f)	Durry	1	Year
g)	Blanket	1	Year
h)	Pillow	0	-
i)	Shoes/Chappal	3	Year
j)	Tooth powder/paste	12	Year
k)	Soap	24	Year
l)	Oil	1200 ml	Year
m)	Utensils (Plate and Glass)	1 Set	Year

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	2	-	2	Private	100 m	Walk
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month No

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-

b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				No	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				No	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Weekly	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Monthly	
f)	Outings	√		Monthly	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes,			Yes	

	maintenance & cleanliness of the premises	
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Daily Inspection
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Joint Director Social Welfare Department
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		2
b) Details of Training Programmes		<ol style="list-style-type: none"> <li>1. Training by CARA at Bhopal</li> <li>2. Training by CARA at Bhopal with CWC Members</li> <li>3. Training by Sewabharti Jabalpur Regarding Adoption Processor at Jabalpur</li> </ol>
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		<ol style="list-style-type: none"> <li>1. Training by CARA at Bhopal</li> <li>2. Training by CARA at Bhopal with CWC Members</li> <li>3. Training by Sewabharti Jabalpur Regarding Adoption Processor at Jabalpur</li> </ol>
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		Nil
Suggestion of CWC/Inspection Committee		Suggestion in corporate in functioning of this institute

Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	Any rare within India about child care and adoption processor
---	---

***Maharashtra***

<b>MH/01/ NGO/61</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Apang Kalyan Va Punarvasan Sanstha	
Address for Communication	Dahiwadi Tal-Man, Dist. Satara, Pin-415508	
Telephone (with STD code)	02165-220102	
Fax	-	
Email ID	<a href="mailto:akvpsd@gmail.com">akvpsd@gmail.com</a>	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Mr. Devkule Prathad Anna	
Vision of NGO	The physical handicap children and orphan by any reason can be given help, care, protection to man as well as women	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	8 <sup>th</sup> Jan. 1993	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
8 <sup>th</sup> Jan. 1993	F 2587/S	Dahiwadi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	Act 1976 Rg No 083970059	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	52	
Total No. of Professional Staff		
a) Male	32	
b) Female	20	
Total number of		
a) Full Time	25	
b) Part time Staff	27	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years		



2009-10		2008-09		2007-08	
25		23		22	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Documents/communication material maintained at the organizational level				Annual Report, Brochure, Leaflet, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Sidhanath Balgreh Dahiwadi Tal-man	
Contact Details					
a) Name of Superintendent/Secretary				Sachin Pralhad Devkule	
b) Address				A/P Dahiwal Tal-Man, Dist. Satara, Pin-415508	
c) Phone				09421179556	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO (Apang Kalyan Va Punarvasan Sanstha Dahiwadi Tal-Man, Dist. Satara)	
Year of Establishment of the Home				1993	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				200	
b) Present Strength				200	
Number of Children lodged in the home having families residing in the same State/UT				200	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	15	25	40	
c)	10-15 years	-	60	60	
d)	15-18 years	-	100	100	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	

c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	100	100	
f)	3-4 years	-	45	45	
g)	4-5 years	15	40	55	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			Food, Free Education, etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Food, Free Education, etc		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	15	400	-	-
c)	Sick room/ First Aid Room	5	150	-	-
d)	Kitchen	2	150	-	-
e)	Dinning Hall	1	1000	-	-
f)	Recreation room	1	500	-	-
g)	Library	1	400	-	-
h)	Counseling & Guidance room	1	150	-	-
i)	Office rooms	1	150	-	-
j)	Workshops	1	400	-	-
k)	Separate Bathrooms for boys and girls	7	500	-	-
l)	Separate Latrines for boys and girls	7	500	-	-
m)	Store room	2	200	-	-

n)	Play Ground	1	1000	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				5600 sq. mts	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	3	3	B.A. B. Ed.	7,000	-
b)	Social Welfare Officer	2	2	M.S.W.	7,000	-
c)	Counselor	1	1	B.A.	5,000	-
d)	Case Worker	1	1	B.A.	5,000	-
e)	Doctor (Part time or Full time)	2	2	B.A.M.S.	10,000	-
f)	Paramedical Staff	4	4	-	5,000	-
g)	Educator	9	9	B.A.	7,000	-
h)	Vocational Instructor	1	1	B.A./ I.T.I.	7,000	-
i)	Store-keeper cum Accountant	2	2	B.A.	5,000	-
j)	Music Teacher	1	1	B.A.	6,000	-
k)	Sports/ Yoga Teacher	1	1	B.A.	7,000	-
l)	Driver	1	1	H.S.C.	5,000	-
m)	Cook	8	8	H.S.C.	4,000	-
n)	House Aunty	8	8	H.S.C.	4,000	-
o)	Security Guard	4	4	H.S.C.	4,000	-
p)	Helper	2	2	H.S.C.	4,500	-
q)	Sweeper	2	2	H.S.C.	4,500	-
r)	Any other (Please Specify)	-	-	-	4,000	-
	Total	52	52	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>

b)	<b>Individual Care Plan</b>	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	<b>Case file</b>	√
i)	<b>Inquiry report file</b>	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

Health related services available for Children	First Aid
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	Saturday, 10:00 a.m. to 1:00 p.m.
Frequency of Doctor's visit	Weekly
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	-
Specialized services are provided for them	Yes
If yes, Please provide in details	Physio Therapy
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three Times
What types of special diet is provided for sick infant or children	As per needs and with the advice of doctor
How many cooks are there	Eight
Whether children are helping at the time of cooking in any way	-
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	1	Yearly
d)	Under garments	1	Every 6 Months
e)	Towel	1	Every 6 Months
f)	Durry	1	Every 6 Months

g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	1	Every 6 Months
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	100	95	5	Govt.	½ km	Bus
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month -

Whether the educational facilities are adequate for children No

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	No Course
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-

i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Weekly	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Everyday, 10:00 a.m. to 7:00 p.m.	
What types of books provide for Children				Magazine, Journal, etc	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	

h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Organisation Competition
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Workshop Training, Orphan Physically Handicap Children (Care and Protection Children)
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Care and Protection ★ Co-operation
Suggestion of CWC/Inspection Committee		★ Laboratory ★ Computer Teach Lab. ★ Instruments
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Children care Handicap Welfare & Rehabilitation Disability

<b>MH/02/ NGO/62</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	International Mission of Dr. Ambedkar Ed. Society	
Address for Communication	Panchsheel Nagar, Nagpur-17	
Telephone (with STD code)	09326453687	
Fax	-	
Email ID	mohit5@gmail.com	
Website of Organization	-	
Type of Child Care Institution being run	Children Home (Bal Sadan)	
Whether run by	NGO	
Name and contact of Chief Functionary	Smt. Kantabai Damle	
Vision of NGO	-	
Mission of NGO	To develop Child	
Key Objectives	Care of Child	
Major Activities	Work for Women and Child	
Target group/ Stakeholders	Women and Children	
Geographical location/area	Nagpur (Maharashtra)	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	9 <sup>th</sup> July 1970	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
1970	F-1179	Nagpur
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	7	
Physical Assets of the Organization	Rented Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	5	
Total No. of Professional Staff		
a) Male	3	
b) Female	2	
Total number of		
a) Full Time	3	
b) Part time Staff	2	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years		



2009-10	2008-09	2007-08			
2,40,000	2,40,000	2,40,000			
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Documents/communication material maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Prince Bal Sadan	
Contact Details					
a) Name of Superintendent/Secretary				Smt. Kantabai Damle	
b) Address				Panchsheel Nagar, Nagpur-17	
c) Phone				09326453687	
d) Fax				-	
e) Email				mohitfive5@gmail.com	
<b>Type of Institution</b>				<b>Children Home and Shelter Home</b>	
Run by				NGO (International Mission of Dr. Ambedkar Ed. Society)	
Year of Establishment of the Home				1993	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
c) Capacity				20	
d) Present Strength				20	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				Parentless Children	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	2	4	6	
c)	10-15 years	7	7	14	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	

e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	9	11	20	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			Basic needs.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
c)	Juvenile Justice Board	-			
d)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	20	20
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	B-3, G-2	-	-	-
l)	Separate Latrines for boys and girls	B-2,G-1	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)	2000 sq. mts
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	Yes

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	M.B.B.S.	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	12 <sup>th</sup>	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	9 <sup>th</sup>	-	-
n)	House Aunty	1	1	4 <sup>th</sup>	-	-
o)	Security Guard	1	1	4 <sup>th</sup>	-	-
p)	Helper	1	1	10 <sup>th</sup>	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	6	5	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Parentless Children
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Certificate of Death of Parents

### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	<b>Individual Care Plan</b>	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>

d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	<b>Case file</b>	√
i)	<b>Inquiry report file</b>	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### **MEDICAL CARE**

Health related services available for Children	Doctor and Medicine available
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	9:00 a.m. to 4:00 p.m.
Frequency of Doctor's visit	Monthly
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Specialized services are provided for them	No
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### **NUTRITION AND DIET SCALE**

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three Times
What types of special diet is provided for sick infant or children	As per needs and with the advice of doctor
How many cooks are there	Two
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### **CLOTHING AND BEDDING**

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	1	Yearly
d)	Under garments	2	Yearly
e)	Towel	2	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly

i)	Shoes/Chappal	1	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Twice every 2 years

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	√	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	8	6	2	Govt.	1 km	By Walk
c)	Secondary	10	3	7	Govt.	1 km	By Walk
d)	Higher	2	2	-	Govt.	2 km	By Cycle
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month 10/-

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	No Course
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Weekly	
c)	Music	-		Daily	
d)	Television	√		Yearly	
e)	Picnic	√		Yearly	
f)	Outings	√		-	
g)	Cultural Programme	-		Yearly	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				8:00 a.m. to 10:00 a.m.	
What types of books provide for Children				Magazine, Comics, etc	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>MH/03/ NGO/63</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Chacha Nehru Balasadan	
Address for Communication	A.P. Kavathe Mahankal (Vidyanagar), Tal. Kavathe, Mahankal, Dist. Sangli, Maharashtra	
Telephone (with STD code)	02341-223562	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	-	
Vision of NGO	Progress of Children and Women	
Mission of NGO	Progress of Children and Women	
Key Objectives	-	
Major Activities	Training centre and hostels of girls	
Target group/ Stakeholders	Women and Children	
Geographical location/area	Sangli	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	2 <sup>nd</sup> August, 1985	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under Indian Societies Registration Act 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
2 <sup>nd</sup> August 1985	1293, F1251	Sangli
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	11	
Physical Assets of the Organization	Land 1 Acre	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	24	
Total No. of Professional Staff	9	
a) Male		
b) Female		
Total number of		
a) Full Time		
b) Part time Staff		
<b>FINANCIAL MANAGEMENT</b>		



Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
9,45,722		7,33,555		7,86,628	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	-	-	-	√	√
DOCUMENTATION					
Documents/communication material maintained at the organizational level				Annual Report, Brochure and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>				Chacha Nehru Balsadan	
Contact Details					
f) Name of Superintendent/Secretary				Sau. Trishala Banda Chaugule	
g) Address				A.P. Kavathe Mehankal, Dist. sangli	
h) Phone				02341-223562	
i) Fax				-	
j) Email				-	
<b>Type of Institution</b>				<b>Children Home (Both Girls and Boys)</b>	
Run by				NGO (Ahilya Mahila Mandal Hinganagaon)	
Year of Establishment of the Home				1993,1997	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				20	
b) Present Strength				20	
Number of Children lodged in the home having families residing in the same State/UT				1	
Reasons for staying in the home in case of children having families (provide details)				Poverty	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	7	1	8	
c)	10-15 years	7	-	7	
d)	15-18 years	5	-	5	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	

c)	6-12 month	2	-	2	
d)	1-2 years	3	1	4	
e)	2-3 years	6	-	6	
f)	3-4 years	4	-	4	
g)	4-5 years	2	-	2	
h)	More than 5 Years	2	-	2	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	25 * 20	20	20
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	12 * 10	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	12 * 10	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	3	12 * 4	-	-
l)	Separate Latrines for boys and girls	4	12 * 4	-	-
m)	Store room	-	12 * 10	-	-

n)	Play Ground	1	-	-	-
o)	Vocational Training Centre		10 * 25	-	-
Total area of the Campus (Sq. ft.)				1256	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	9 <sup>th</sup>	1,500/-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	1,000	June 2006
n)	House Aunty	2	2	B.A.	1,000	June 2007
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	5	4	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		No
If Yes Please mention		Having Single Parent, Parentless, Poor parent
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Physical and Educational Progress, Family record
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>

a)	Admission and discharge register	√
b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other(Please Specify): Check Book, Voucher	√

### Minimum Standard of Care

#### MEDICAL CARE

Health related services available for Children	Visiting Doctor
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	No
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	√
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Specialized services are provided for them	No
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	Auto Rickshaw

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Two
What types of special diet is provided for sick infant or children	Tea, Milk etc
How many cooks are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	2	Yearly
d)	Under garments	2	-
e)	Towel	2	-

f)	Durry	-	-
g)	Blanket	2	-
h)	Pillow	-	-
i)	Shoes/Chappal	1	-
j)	Tooth powder/paste	25 gm	-
k)	Soap	2	-
l)	Oil	100 ml	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	√
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	√	-
f)	Non-formal classes	-	-
g)	Private coaching	√	-
h)	Bridge Course	-	-
i)	Any other: Vocational	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	4	1	3	Private	10 m	-
c)	Secondary	14	-	14	Private	200 m	-
d)	Higher	2	-	2	Private	200 m	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	No Course
b)	Beauty Culture	-	-	-	-
c)	Computer	-	2	2	6 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/	-	-	-	-

	mobile repairing				
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Typing Marathi	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Grants are insufficient, There must be any scale for staff government grant must be for building	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Daily	
i)	Debates	√		Monthly	
j)	Radio	√		Daily	
k)	Any Other: Drawing and painting	√		Monthly	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Historical, Stories, Scientifically books	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			No	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			No	

f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Government
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		2
b) Details of Training Programmes		★ CWC- Chairman ★ Government
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		No Response
Suggestion of CWC/Inspection Committee		No Response
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

<b>MH/04/ NGO/64</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Samrat Ashok Yuvak Mandal	
Address for Communication	Sanjay Gandhi Nagar, Gariba Hatav No-2, Vijaypur Naka, Solapur-413004	
Telephone (with STD code)	0217-2745730	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Ramesh Shivaji Sutkumar 9422066538	
Vision of NGO	-	
Mission of NGO	Women and Child Development	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1982	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
1982	MAH/1068/SUR	Solapur
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	48	
Total No. of Professional Staff		
a) Male	15	
b) Female	12	
Total number of		
a) Full Time	22	
b) Part time Staff	26	



<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
14		13		7	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	√	√	-	√	√
<b>DOCUMENTATION</b>					
Documents/communication material maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Samrat Ashok Yuvak Mandal's Balsadan	
Contact Details					
a) Name of Superintendent/Secretary				Mrs. Vimal ramesh Sutkar	
b) Address				88/100, Shashu Nagari, Vijapur Road, Solapur	
c) Phone				2745731	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home (Both Girls and Boys)</b>	
Run by				State Govt. (Women and Child Development Pune)	
Year of Establishment of the Home				1997	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				20	
b) Present Strength				20	
Number of Children lodged in the home having families residing in the same State/UT				20	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	7	7	
c)	10-15 years	9	4	13	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	

		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	1	2	3	
c)	6-12 month	-	-	-	
d)	1-2 years	-	3	3	
e)	2-3 years	-	6	6	
f)	3-4 years	-	-	-	
g)	4-5 years	3	3	6	
h)	More than 5 Years	-	2	2	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			Shelter, Meals, Medical School Uniform, Daily User Clothes etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			NO		
Whether the Institution is certified as Fit Institution by					
c)	Juvenile Justice Board	-			
d)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	2	800	-	-
c)	Sick room/ First Aid Room	1	270	-	-
d)	Kitchen	1	360	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	270	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	140	-	-

l)	Separate Latrines for boys and girls	10	90	-	-
m)	Store room	1	270	-	-
n)	Play Ground	1	1000	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 20000

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	2,000/-	01-04-10
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	M.D.	1,000	01-04-10
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	7 <sup>th</sup>	1,500	01-04-10
n)	House Aunty	2	2	S.S.L.	2*1,500	01-04-10
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	4 <sup>th</sup>	1,000	01-04-10
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	6	6	-	8,500/-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention -

Whether the organization maintains any specific Proforma for recording details of Information of every child Yes

If Yes, what kind of information you have collected from children -

Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	-	
c)	Supervision register	$\checkmark$	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	$\checkmark$	
f)	Stock Register	$\checkmark$	
g)	Visitor's book	$\checkmark$	
h)	Case file	$\checkmark$	
i)	Inquiry report file	$\checkmark$	
j)	Stock register	-	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
Health related services available for Children		First Aid Box	
Does the home have a Medical Care Unit for health check-up of Children		-	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Monthly	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	$\checkmark$	
b)	Dispensary	$\checkmark$	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		No	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As per Doctor's Instruction	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly

d)	Under garments	4	Yearly
e)	Towel	1	Quarterly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	2	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	6	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	1	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	√
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	√	-
f)	Non-formal classes	-	√
g)	Private coaching	-	√
h)	Bridge Course	-	√
i)	Any other: Vocational	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	No Course
b)	Beauty Culture	-	-	-	-
c)	Computer	6	3	9	6 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				B.C.A.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Short of Govt. Grant	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	-		-	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	√		Yearly	
j)	Radio	√		Daily	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Granth, Story Books, etc	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	

g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		1
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Women and Child Development Officer of Solapur
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		No Response
Suggestion of CWC/Inspection Committee		No Response
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

<b>MH/05/ NGO/65</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	St. Joseph's Home and Nursery	
Address for Communication	Dr (Mrs) Leela Melville Marg Agripada, Byculla, Mumbai 400008	
Telephone (with STD code)	022-23088123	
Fax	Nil	
Email ID	<a href="mailto:Joshome27@rediffmail.com">Joshome27@rediffmail.com</a>	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sr. Mary Thomas St. Joseph's Home and Nursery Dr (Mrs) Leela Melville Marg Agripada, Byculla, Mumbai 400008	
Vision of NGO	To help them discover themselves and their potential as true human beings	
Mission of NGO	To help the children become responsible members of society by providing a "Home" environment so that they can grow up free from free and want	
Key Objectives	To provide the necessary education, health, care, food, clothing and shelter I order to facilitate their growth and all round development	
Major Activities	Education and All round development	
Target group/ Stakeholders	Children	
Geographical location/area	Mumbai Central, Agripada area	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1875	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Under the Bombay Public trust, 1950	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
4 <sup>th</sup> May 1966	F-1375	Bombay
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	No	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	5	
Physical Assets of the Organization	Own building and Furniture	



<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization					19
Total No. of Professional Staff					
a) Male					-
b) Female					6
Total number of					
a) Full Time					18
b) Part time Staff					1
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
1,049,079.74		905,128.24		885,583.74	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify) Through Women & Child Welfare, Pune
-	-	-	-	-	√
<b>DOCUMENTATION</b>					
Documents/communication material maintained at the organizational level				Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Children Home	
Contact Details					
a) Name of Superintendent/Secretary				Sr. Mary Thomas	
b) Address				St. Joseph's Home and Nursery Dr (Mrs) Leela Melville Marg Agripada, Byculla, Mumbai 400008	
c) Phone				022-23088123	
d) Fax				Nil	
e) Email				<a href="mailto:Joshome27@rediffmail.com">Joshome27@rediffmail.com</a>	
<b>Type of Institution</b>				<b>Children Home (Both Girls and Boys)</b>	
Run by				NGO	
Year of Establishment of the Home				1875	
Supported by				Women & Child Welfare, Pune	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				90	
b) Present Strength				86	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families				-	

(provide details)					
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	18	-	18	
c)	10-15 years	53	-	53	
d)	15-18 years	15	-	15	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	11	-	11	
d)	1-2 years	10	-	10	
e)	2-3 years	10	-	10	
f)	3-4 years	15	-	15	
g)	4-5 years	10	-	10	
h)	More than 5 Years	30	-	30	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home				Shelter, Education etc.	
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960				Yes	
Any other registration				Nil	
Whether the Institution is certified as Fit Institution by					
e)	Juvenile Justice Board			-	
f)	Child Welfare Committee			√	
If Yes, Please Specify the Facilities provided				-	
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned			-	
b)	Rented			-	
c)	Lease			√	
d)	Donated			-	
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	1875	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-

d)	Kitchen	-	-	-	-
e)	Dinning Hall	1	640	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	11	-	-	-
l)	Separate Latrines for boys and girls	10	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 3,927.4

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	S.S.L.C. Dip. Accountancy	-	16-11-10
b)	Social Welfare Officer	-	1	M.S.W.	2,500	01-06-07
c)	Counselor	-	-	-	-	-
d)	Case Worker	1	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	M.D.	1,000	01-04-10
f)	Paramedical Staff	1	1	Course of Social work	5,775	6-11-2009
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	SSC & Steno.	2,000	01-9-2003
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	5	-	-	-	-
n)	House Aunty/ Care Taker	1	1	8 <sup>th</sup>	2,500	01-07-10
o)	Security Guard	2	2	-	7,721	-
p)	Helper	2	5	4 <sup>th</sup>	1,000	-
q)	Sweeper	-	1	9 <sup>th</sup>	4,000	10-3-2011

r)	Any other (Please Specify): Receptionist Office Assistant	- -	1 1	12 <sup>th</sup> B.A.	3,500 12,139	13-11-2009 01-04-2002
	Total	14	15	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Criteria for admission of children in homes is through Child Welfare Committee
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Death certificate of deceased parent, Municipal Birth Certificate, Home Address, Agreement of the House as per required by CWC
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	-
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other(Please Specify) → Clothing Register, Stationary and Daily Attendance Register	<input checked="" type="checkbox"/>

### Minimum Standard of Care

#### MEDICAL CARE

Health related services available for Children	First Aid Box
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	Daily, 8:00 to 12:00 a.m. and Afternoon 3:00 to 8:00 p.m.
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	Yes
<b>Referral of Cases</b>	
a)	Govt. Hospital <input checked="" type="checkbox"/>
b)	Dispensary -
c)	Any other <input checked="" type="checkbox"/>

How many children are suffering from communicable diseases and HIV/AIDS	Nil						
Specialized services are provided for them	No						
If yes, Please provide in details	-						
Whether ambulance facility is available for patients	No						
Any other Facilities	No						
<b>NUTRITION AND DIET SCALE</b>							
Whether any menu chart followed by homes	Yes						
How many times meals are provided in a day	Three						
What types of special diet is provided for sick infant or children	Porridge, Khichidi, Milk, Egg, Fruits etc.						
How many cooks are there	Five						
Whether children are helping at the time of cooking in any way	No						
Whether any Nutrition and Child Development Officer is there	No						
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item			Number		Frequency (Month/Year)	
a)	Summer Clothing			2		Yearly	
b)	Winter Clothing(Jersey)			1		Yearly	
c)	School Uniform			3		Yearly	
d)	Under garments			2		Yearly	
e)	Towel			2		Yearly	
f)	Durry			1		Yearly	
g)	Blanket			1		Yearly	
h)	Pillow			1		Yearly	
i)	Shoes/Chappal			1		Yearly	
j)	Tooth powder/paste			1		Monthly	
k)	Soap			1		Monthly	
l)	Oil			1		Monthly	
m)	Utensils (Plate and Glass)			1		Yearly	
<b>EDUCATION</b>							
Whether educational facilities are available for children				Yes			
Are any of the educational facilities available within the institution							
a)	Formal School on Premises			Yes		No	
b)	Pre-school			√		√	
c)	Primary			√		-	
d)	Secondary			√		-	
e)	Higher			-		-	
f)	Non-formal classes			-		-	
g)	Private coaching			√		-	
h)	Bridge Course			-		-	
i)	Any other: Vocational			-		-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-

b)	Primary	-	-	-	-	-	-
c)	Secondary	29	-	29	B.M.C.	Across road	Walking
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					-		
If Yes, details of qualification					-		
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					-		
Difficulty (if any)					-		
<b>RECREATIONAL FACILITIES</b>							
Whether recreational facilities are available					Yes		
If yes, what are the recreation facilities available for children in Institution							
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly			
a)	Indoor games	√		Weekly			
b)	Outdoor games	√		Weekly			
c)	Music	√		Daily			
d)	Television	√		Weekly			
e)	Picnic	√		Yearly			

f)	Outings	√	Monthly
g)	Cultural Programme	√	Yearly
h)	Yoga	√	Daily
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other:	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		Yes	
If Yes, Opening timing or day		Week end	
What types of books provide for Children		Morals, Encyclopedia and General knowledge and Magazine and Newspaper	
<b>SANITATION AND HYGIENE FACILITIES</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S.No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What types of Co-operation and Co-ordination received for homes		Grants: Through Director of Women & Child Welfare Department, Pune	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		Meeting and Oral Evaluation	
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes	
If Yes, when and by whom		Evaluation is done by Us. It is on going process, If the NGO's finds any negative aspect in the evaluation, Then try to correct it	
Whether CWC members visit your institution regularly		No	
<b>TRAINING NEEDS</b>			
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes	
If Yes, a) Number of Training Programmes organized		1	

b) Details of Training Programmes	JJ Act, 2000 and Sharing of Problem faced by institution
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	NIPCCD in Indore
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ District Women &amp; Child Welfare Office (Worli)</li> <li>★ Director of Women &amp; Child Welfare Office, (Pune)</li> <li>★ Child Welfare Committee</li> </ul>
Suggestion of CWC/Inspection Committee	No Response
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	No Response



<b>MH/06/ NGO/66</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Azad Hind Education Society	
Address for Communication	Manur Tal. Kalwan, Dist. Nasik (Maharashtra)	
Telephone (with STD code)	02592-221980	
Fax	-	
Email ID	bbalsadan@rediffmail.com	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Mr. R.K. Jadhav	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1997	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
-	-	-
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	11	
Total No. of Professional Staff		
a) Male	7	
b) Female	4	
Total number of		
a) Full Time	4	
b) Part time Staff	7	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years		

2009-10		2008-09		2007-08	
-		-		-	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify) Dividend
-	√	-	-	-	-
<b>DOCUMENTATION</b>					
Documents/communication material maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Bhavna Balgreh, Manur(kalwan)	
Contact Details					
a) Name of Superintendent/Secretary				Mr. R.K. Jadhav	
b) Address				Manur Tal. Kalwan, Dist. Nasik	
c) Phone				02592-221980	
d) Fax				-	
e) Email				bbalsadan@rediffmail.com	
<b>Type of Institution</b>				<b>Children Home (Both Boys and Girls)</b>	
Run by				NGO	
Year of Establishment of the Home				1998	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				100	
b) Present Strength				70	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	11	20	32	
c)	10-15 years	6	32	38	
d)	15-18 years	0	1	1	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
i)	0-4 month	-	-	-	
j)	4-6 month	-	-	-	
k)	6-12 month	-	-	-	

l)	1-2 years	-	-	-	
m)	2-3 years	-	-	-	
n)	3-4 years	-	-	-	
o)	4-5 years	-	-	-	
p)	More than 5 Years	17	53	70	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	2400	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	156	-	-
d)	Kitchen	1	250	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	156	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	7	600	-	-
l)	Separate Latrines for boys and girls	10	600	-	-
m)	Store room	1	250	-	-
n)	Play Ground	1	2000	-	-

o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				6162	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	Graduate	5,500/-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	2	-	M.S.W.	3000/-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	B.T.M.S.	1,000/-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	H.S.C.	2,000/-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	-	S.S.C.	1,600/-	-
n)	House Aunty	2	-	S.S.C.	1,600/-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	2	-	S.S.C.	1,600/-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
Total		11	-	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Through C.W.C.
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>

c)	Supervision register	-
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

Health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	Weekly in Sunday
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other: Own Hospital	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	-
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three
What types of special diet is provided for sick infant or children	As per Doctor's Advice
How many cooks are there	Two
Whether children are helping at the time of cooking in any way	-
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	1	Yearly

h)	Pillow		1		Yearly		
i)	Shoes/Chappal		1		Yearly		
j)	Tooth powder/paste		1		Monthly		
k)	Soap		1		Monthly		
l)	Oil		1		Monthly		
m)	Utensils (Plate and Glass)		-		-		
<b>EDUCATION</b>							
Whether educational facilities are available for children				Yes			
Are any of the educational facilities available within the institution							
a)	Formal School on Premises		Yes		No		
b)	Pre-school		-		-		
c)	Primary		√		-		
d)	Secondary		√		-		
e)	Higher		-		-		
f)	Non-formal classes		-		-		
g)	Private coaching		-		-		
h)	Bridge Course		-		-		
i)	Any other: Vocational		-		-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	28	17	11	-	-	-
c)	Secondary	31	25	6	Private	-	-
d)	Higher	1	1	-	Private	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			-	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			-	
h)	Sufficient space for washing			-	
i)	Clean and fly-proof kitchen			-	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	-
What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	-
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	Yes
If Yes,	
a) Number of Training Programmes organized	1
b) Details of Training Programmes	NGOs workshops
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	No Response
Suggestion of CWC/Inspection Committee	No Response
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	No Response



<b>MH/07/ NGO/67</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	St. Catherine's Home	
Address for Communication	Veera desai Road, Andheri(W), Mumbai 400058	
Telephone (with STD code)	022-26762312/26766906	
Fax	-	
Email ID	stcatherineshome@gmail.com	
Website of Organization	-	
Type of Child Care Institution being run	Children's Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sr. Sneha Alice Vaz 022 26763021	
Vision of NGO	We rediscover the I in Girls	
Mission of NGO	To provide a haven to helpless children particularly girls	
Key Objectives	To give them a holistic development to find their true identity	
Major Activities	Education, Computer Skills, provide opportunities to stand on their feet	
Target group/ Stakeholders	Women, Children and Adolescent	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1922	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	JJ Act, 2000	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
16-04-2010	0474	Pune
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	083780275	
Any other Registration/ Recognition with Central / State Govt.:	Indian, CARA, Foreign, Adoption	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	5	
Physical Assets of the Organization	Yes	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	75	
Total No. of Professional Staff		
a) Male	2	
b) Female	4	
Total number of		

a) Full Time				18
b) Part time Staff				-
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years				
2009-10		2008-09		2007-08
77,68,455.26		62,76,288.76		39,58,324.26
Sources of Funding of the NGO (Cash/kind/other)				
Community Support	State Govt.	National	International	Donation
√	√	-	√	√
Any Other (Please specify)				
-				
<b>DOCUMENTATION</b>				
Documents/communication material maintained at the organizational level			Annual Report, Brochure, Leaflet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			St. Catherine's Home	
Contact Details				
a) Name of Superintendent/Secretary			Sr. Sneha Alice Vaz	
b) Address			Veera desai Road, Andheri(W), Mumbai 400058	
c) Phone			022-26762312/26766906	
d) Fax			-	
e) Email			stcatherineshome@gmail.com	
<b>Type of Institution</b>			<b>Children Home (Both Boys and Girls)</b>	
Run by			NGO	
Year of Establishment of the Home			1922	
Supported by			State Govt. and Donations: Indian and Foreign	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			350	
b) Present Strength			350	
Number of Children lodged in the home having families residing in the same State/UT			92	
Reasons for staying in the home in case of children having families (provide details)			Due to Financial Status	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	1	1	2
b)	5-10 years	50	-	50
c)	10-15 years	144	-	144
d)	15-18 years	71	-	71
Details of Stay of Children in the home				

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	1	3	4
b)	4-6 month	13	3	16
c)	6-12 month	41	4	45
d)	1-2 years	49	-	49
e)	2-3 years	58	-	58
f)	3-4 years	47	-	47
g)	4-5 years	37	-	37
h)	More than 5 Years	111	-	111

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	1	-	1
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

Facilities and support services provided for the children staying in Home	Education, Playground, Computer Lab, Home Theatre, Study Halls
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960	Yes
Any other registration	Societies Registration Act, 1860 registered under the Public Trust Act 1950
Whether the Institution is certified as Fit Institution by	
a) Juvenile Justice Board	√
b) Child Welfare Committee	√
If Yes, Please Specify the Facilities provided	Education, Playground, Computer Lab, Home Theatre, Study Halls

**INFRASTRUCTURE**

Infrastructure available	
a) Owned	-
b) Rented	-
c) Lease	-
d) Donated	√

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	6	704	-	-
b)	Classrooms	6	704	-	-
c)	Sick room/ First Aid Room	1	1286	-	-
d)	Kitchen	1	307	-	-
e)	Dinning Hall	6	704	-	-
f)	Recreation room	1	-	-	-
g)	Library	6	704	-	-
h)	Counseling & Guidance room	1	28.17	-	-

i)	Office rooms	4	112.68	-	-
j)	Workshops	6	658.05	-	-
k)	Separate Bathrooms for boys and girls	83	425	-	-
l)	Separate Latrines for boys and girls	65	233.35	-	-
m)	Store room	6	136.62	-	-
n)	Play Ground	2	25183	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 1,65,724.07

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A. B. Ed.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	6	6	-	-	-
d)	Case Worker	-	1	M.S.W.	-	-
e)	Doctor (Part time or Full time)	-	4	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	6	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	1	-	-	-
j)	Music Teacher	-	1	-	-	-
k)	Sports/ Yoga Teacher	-	1	-	-	-
l)	Driver	-	1	10 <sup>th</sup>	-	-
m)	Cook	5	6	-	-	-
n)	House Aunty	-	9	-	-	-
o)	Security Guard	-	14	-	-	-
p)	Helper	10	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify): Clerk		3			
	Nurses		4			
	Total	22	51	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention Orphan, Court Committed,

		Rescue & Preventive, Rescued Minors, HIV +ve
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Family Information
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	-
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
Health related services available for Children		Camps outside hospital services
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		8:00 a.m. to 6:00 p.m.
Frequency of Doctor's visit		Weekly
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	<input checked="" type="checkbox"/>
b)	Dispensary	-
c)	Any other: Own Infirmary	<input checked="" type="checkbox"/>
How many children are suffering from communicable diseases and HIV/AIDS		56
Specialized services are provided for them		Yes
If yes, Please provide in details		Medical Education, Nutrition and Counselling etc
Whether ambulance facility is available for patients		No
Any other Facilities		Provided Van to reach the girls to school
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Three
What types of special diet is provided for sick infant or children		Khichdi, dal, Rice
How many cooks are there		Six
Whether children are helping at the time of cooking in any way		Yes
Whether any Nutrition and Child Development Officer is there		Yes

<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item			Number		Frequency (Month/Year)	
a)	Summer Clothing			1		Yearly	
b)	Winter Clothing(Jersey)			1		Yearly	
c)	School Uniform			2		Yearly	
d)	Under garments			6		Yearly	
e)	Towel			2		Yearly	
f)	Durry			2		-	
g)	Blanket			1		Yearly	
h)	Pillow			1		Yearly	
i)	Shoes/Chappal			3		Yearly	
j)	Tooth powder/paste			1		Monthly	
k)	Soap			2		Monthly	
l)	Oil			1		Monthly	
m)	Utensils (Plate and Glass)			1		-	
<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
a)	Formal School on Premises			Yes		No	
b)	Pre-school			-		√	
c)	Primary			√		-	
d)	Secondary			√		-	
e)	Higher			√		-	
f)	Non-formal classes			√		-	
g)	Private coaching			√		-	
h)	Bridge Course			-		√	
i)	Any other:			-		-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	13	-	13	Govt.	4 km	Van
d)	Higher	11	-	11	Govt.	2 km	Walking
e)	Non-formal classes	2	-	2	Govt.	2 km	Bus
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade		Number of Children			Duration of Course	

		Boys	Girls	Total	
a)	Cutting and tailoring	-	18	18	3 Months
b)	Beauty Culture	-	16	16	3 Months
c)	Computer	-	128	128	6 Months
d)	Jute bags and 'moti' work	-	15	15	6Months
e)	Painting and Mehendi	-	5	5	1 Month
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	1	1	1 Month
n)	Shoes making/leather craft	-	-	-	-
o)	Any other				
	Nursing	-	2	2	2 Years
	Hotel Management	-	1	1	3 Months
Whether instructors are trained				Yes	
If Yes, details of qualification				Courses done in diploma in beautician & Computer	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Weekly	
e)	Picnic	√		Yearly	
f)	Outings	√		Half Yearly	
g)	Cultural Programme	√		Quarterly	
h)	Yoga	√		Weekly	
i)	Debates	√		Yearly	
j)	Radio	√		Weekly	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				8:00 a.m. to 2:00 p.m.	
What types of books provide for Children				Educational, Stories, Encyclopedia	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					

S.No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Health Club, Co-curricular activities, counseling educational exercises.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Education through our management
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		By our society & Management on Feb, 2010 and June, 2010
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Prerna and IJM
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		<ul style="list-style-type: none"> <li>★ Rotary Club</li> <li>★ Indian Development Foundation</li> <li>★ Nirmala Niketan</li> <li>★ Kotak</li> <li>★ Lions Club</li> <li>★ International Justice Mission</li> <li>★ Gold- Nepal</li> <li>★ Sunlab- Kolkatta</li> </ul>
Suggestion of CWC/Inspection Committee		★ Guidance is given when difficulties are expressed
Mention Areas/issues on which the Staff/Members of your		No Response



Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	
---	--

<b>MH/08/ NGO/68</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Atul Katariya Memorial Charitable Trust 'Avishri Balsadan'	
Address for Communication	11, Parshawanath Housing Society, Nasikphata, karaveadi, Puna-411034	
Telephone (with STD code)	020-27125674	
Fax	02117 235225	
Email ID	avishribalsadan96@gmail.com	
Website of Organization	<a href="http://www.avishribalsadan.blogspot.com">www.avishribalsadan.blogspot.com</a>	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Anil Kumar Shrimal Katariya 11, Parshwanath Housing Society, Kasarwadi, Puna 411034	
Vision of NGO	Social Work	
Mission of NGO	-	
Key Objectives	Rehabilitation of needy	
Major Activities	Orphans and Poor Child	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	16-08-1996	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
16-12-1996	E-2374	Pune
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	4	
Total No. of Professional Staff		
a) Male	2	
b) Female	2	
Total number of		
a) Full Time	4	

b) Part time Staff		-		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years				
2009-10		2008-09	2007-08	
3,50,000		3,05,000	2,80,000	
Sources of Funding of the NGO (Cash/kind/other)				
Community Support	State Govt.	National	International	
-	√	-	-	
			Donation	
			√	
			Any Other (Please specify)	
			-	
<b>DOCUMENTATION</b>				
Documents/communication material maintained at the organizational level		Annual Report, Brochure, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		Atul Katariya Memorial Charitable Trust 'Avishri Balsadan'		
Contact Details				
a) Name of Superintendent/Secretary		Anil Kumar Shrimal Katariya		
b) Address		11, Parshawanath Housing Society, Nasikphata, karaveadi, Puna-411034		
c) Phone		020-27125674		
d) Fax		02117 235225		
e) Email		avishribalsadan96@gmail.com		
<b>Type of Institution</b>		<b>Children Home (Both Boys and Girls)</b>		
Run by		NGO		
Year of Establishment of the Home		16 <sup>th</sup> August, 1996		
Supported by		State Govt. and Donations		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		20		
b) Present Strength		20		
Number of Children lodged in the home having families residing in the same State/UT		20		
Reasons for staying in the home in case of children having families (provide details)		-		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	1	-	1
b)	5-10 years	2	5	7
c)	10-15 years	5	3	8
d)	15-18 years	3	1	4
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total

		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	1	-	1
h)	More than 5 Years	10	-	10

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
e)	Mentally challenged	-	-	-
f)	Autism	-	-	-
g)	Physically challenged	-	-	-
h)	Any other (please specify)	-	-	-

Facilities and support services provided for the children staying in Home	Education, Playground, Food, Shelter etc
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960	Yes
Any other registration	No
Whether the Institution is certified as Fit Institution by	
a) Juvenile Justice Board	-
b) Child Welfare Committee	√
If Yes, Please Specify the Facilities provided	CWC Welfare Committee placed all children in our Institute under JJ. Act. 2000

### INFRASTRUCTURE

Infrastructure available	
a) Owned	√
b) Rented	-
c) Lease	-
d) Donated	-

Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	500	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	100	-	-
d)	Kitchen	1	600	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	1	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	500	-	-
j)	Workshops	-	-	-	-

k)	Separate Bathrooms for boys and girls	4	100	-	-
l)	Separate Latrines for boys and girls	3	50	-	-
m)	Store room	-	-	-	-
n)	Play Ground	2	2000	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				20,000	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1	S,S,C, Electrician	-	1996
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	2	S.S.C.	2,100	1996
o)	Security Guard	-	1	12 <sup>th</sup>	1,000	1996
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify): Clerk	-	1	-	1,500	1996
Total		-	5	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Through CWC Applications and Through Institutions
Whether the organization maintains any specific Proforma for recording details of Information of every child	-

If Yes, what kind of information you have collected from children		-	
<b>Maintenance of Registers/Record Maintenance</b>			
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register	<input checked="" type="checkbox"/>	
b)	Individual Care Plan	-	
c)	Supervision register	<input checked="" type="checkbox"/>	
d)	Medical file or medical report	<input checked="" type="checkbox"/>	
e)	Nutrition diet file	-	
f)	Stock Register	<input checked="" type="checkbox"/>	
g)	Visitor's book	<input checked="" type="checkbox"/>	
h)	Case file	<input checked="" type="checkbox"/>	
i)	Inquiry report file	-	
j)	Stock register	<input checked="" type="checkbox"/>	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
Health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Yes, If Needed	
Whether any trained Staff for first-aid		No	
<b>Referral of Cases</b>			
a)	Govt. Hospital	-	
b)	Dispensary	-	
c)	Any other: Private Hospitals	<input checked="" type="checkbox"/>	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		Doctor's prescribed diet given to sick instant	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	-

b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	2	-
d)	Under garments	3	-
e)	Towel	1	-
f)	Durry	-	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/Chappal	1	-
j)	Tooth powder/paste	1	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	√
c)	Primary	-	√
d)	Secondary	-	√
e)	Higher	-	√
f)	Non-formal classes	-	√
g)	Private coaching	-	√
h)	Bridge Course	-	√
i)	Any other:	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	1	-	1	-	½ km	Walking
b)	Primary	5	3	2	-	½ km	Walking
c)	Secondary	10	5	5	-	2 ½ km	Bus
d)	Higher	4	1	3	-	2 ½ km	Bus
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children -

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-

e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any Other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Yearly	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Half Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Full Day as per requirement	
What types of books provide for Children				Educational, Stories, All types etc	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	



f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		As per Requirements
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		1
b) Details of Training Programmes		Training of J.J. Act, 2000
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Dr. Satish Patil Attend leature at 'Sampark Balgram' Bhaje Tal. Maval Dist. Pune of JJ Act, 2000
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Department of Women & Child Care/ Social welfare
Suggestion of CWC/Inspection Committee		★ Good Remark
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Child Development

<b>MH/09/ NGO/69</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Rashtra Saint Tukadoji Maharaj Shikshan Sanstha	
Address for Communication	Bhawani-Wesh Daryapur, District: Amravati (Maharashtra)	
Telephone (with STD code)	9422172607,9421737333	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	State Govt.	
Name and contact of Chief Functionary	-	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	29-02-1998	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
26-2-1998	8043	Amravati, As per 1860 Adhinyam
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	9	
Physical Assets of the Organization	Sufficient	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	4	
Total No. of Professional Staff		
a) Male	-	
b) Female	4	
Total number of		
a) Full Time	-	
b) Part time Staff	-	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years		
2009-10	2008-09	2007-08

1,10,000		1,10,000		1,10,000	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√		-	-	√	-
<b>DOCUMENTATION</b>					
Documents/communication material maintained at the organizational level			Annual Report, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Rashtra Saint Tukadoji Maharaj Shikshan Sanstha		
Contact Details					
a) Name of Superintendent/Secretary			Smt Shaya Ajayrao Ingle		
b) Address			Anath Mulanche Balsadan Bhawani-Wesh Daryapur, District: Amravati (Maharashtra)		
c) Phone			9422172607,9421737333		
d) Fax			-		
e) Email			-		
<b>Type of Institution</b>			<b>Children Home (Both Boys and Girls)</b>		
Run by			State Govt. (Mahila Bal Vikas Department Govt. of Maharashtra)		
Year of Establishment of the Home			2005		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			20		
b) Present Strength			20		
Number of Children lodged in the home having families residing in the same State/UT			20		
Reasons for staying in the home in case of children having families (provide details)			Due to death of Father and Mother and No caretaker is available		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	-	-	
c)	10-15 years	-	14	14	
d)	15-18 years	-	6	6	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	

b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	15	15	
e)	2-3 years	-	2	2	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	3	3	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			Free Lodging & Boarding, Medical Aid, Washing Material, School Material etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			No		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Free Lodging & Boarding, Medical Aid, Washing Material, School Material etc		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	2.78 * 3.13	-	-
d)	Kitchen	1	5.83 * 3.13	-	-
e)	Dinning Hall	1	55.815	-	-
f)	Recreation room	1	13.05 * 6.24	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	2.78 * 3.0	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys	2	1.35 * 1.22	-	-

l)	Separate Latrines for boys	3	1.35 * 1.0	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 81.115

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	12 <sup>th</sup>	1,200 /-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	B.A.M.S.	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	8 <sup>th</sup>	-	-
n)	House Aunty	1	1	8 <sup>th</sup>	900	-
o)	Security Guard	1	1	4 <sup>th</sup>	900	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)					
	Total	5	5	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Direct Admission has not taken by the child home Admission through District Bal Amiti Amravati
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Detail information obtain from sur-

		panch of village, Family History	
<b>Maintenance of Registers/Record Maintenance</b>			
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register	<input checked="" type="checkbox"/>	
b)	Individual Care Plan	<input checked="" type="checkbox"/>	
c)	Supervision register	<input checked="" type="checkbox"/>	
d)	Medical file or medical report	<input checked="" type="checkbox"/>	
e)	Nutrition diet file	<input checked="" type="checkbox"/>	
f)	Stock Register	<input checked="" type="checkbox"/>	
g)	Visitor's book	<input checked="" type="checkbox"/>	
h)	Case file	<input checked="" type="checkbox"/>	
i)	Inquiry report file	<input checked="" type="checkbox"/>	
j)	Stock register	<input checked="" type="checkbox"/>	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
Health related services available for Children		First Aid and Health Check-up	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		Nil	
Frequency of Doctor's visit		Every 3 Moonth	
Whether any trained Staff for first-aid		No	
<b>Referral of Cases</b>			
a)	Govt. Hospital	<input checked="" type="checkbox"/>	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		No	
Specialized services are provided for them		No	
If yes, Please provide in details		Question does not arise	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		No	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		As per guide line of concerning Doctor	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-

b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	1	Yearly
d)	Under garments	-	-
e)	Towel	1	Yearly
f)	Durry	-	-
g)	Blanket	1	Yearly
h)	Pillow	-	-
i)	Shoes/Chappal	-	-
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	2	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other:	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	17	17	-	Govt.	1 km	Foot
d)	Higher	3	3	-	Govt.	1 km	Foot
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month N.A.

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required Educational Facilities are sufficient, hence no question of other facilities

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-

b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any Other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	√		Weekly	
c)	Music	√		Daily	
d)	Television	-		-	
e)	Picnic	√		Monthly	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	√		Monthly	
j)	Radio	√		Weekly	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Daily, 6:00 p.m.	
What types of books provide for Children				Educational, Cultural Books	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	



c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Sh. D.S. Mohiote, Mahila Bal Vikas Officer Amravati District Maharashtra
Whether CWC members visit your institution regularly		-
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		<ul style="list-style-type: none"> <li>★ Seminar under Chairman of Niyantaran Mandal Puna at Akola in the year 08-09 State Govt.</li> <li>★ District Bal Samiti President at Amravati in the year 010-011</li> <li>★ District Mahila Bal Vikas Officer in the year 010-011</li> </ul>
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		No Response
Suggestion of CWC/Inspection Committee		No Response
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

<b>MH/10/ NGO/70</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Ashraya Sanskar & Punarvasan Sanstha	
Address for Communication	'Ashraya Banglow', Near T.V. Center, Malegaon Camp. Dist Nasik (Maharashtra)	
Telephone (with STD code)	02554-255383	
Fax	02554 253983	
Email ID	<a href="mailto:ashrayasanstha@gmail.com">ashrayasanstha@gmail.com</a>	
Website of Organization	-	
Type of Child Care Institution being run	Balsadan	
Whether run by	NGO	
Name and contact of Chief Functionary	Ad. Shamkant D. Patil 9422271996	
Vision of NGO	Social Work	
Mission of NGO	Workwith for worker section of society specially for orphan	
Key Objectives	Care Protection & Rehabilitation of Orphan Children	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	14 <sup>th</sup> March, 1988	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Public Trust Development Act 1950 & Society Act 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
22-03-1988	MH 2187	Nasik
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	State Govt. & Affilisation with Balgram (Maharashtra)	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	13	
Physical Assets of the Organization	Rented	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	8	
Total No. of Professional Staff		
a) Male	4	
b) Female	4	

Total number of					
a) Full Time				8	
b) Part time Staff				-	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
17,98,954		9,21,799		6,27,925	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	-	-	√	-
<b>DOCUMENTATION</b>					
Documents/communication material maintained at the organizational level			Annual Report, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Ashraya Sanskar & Punarvasan Sanstha		
Contact Details					
a) Name of Superintendent/Secretary			Ad. Shamkant D. Patil		
b) Address			‘Ashraya Banglow’, Near T.V. Center, Malegaon Camp. Dist Nasik (Maharashtra)		
c) Phone			02554-255383		
d) Fax			02554 253983		
e) Email			<a href="mailto:ashrayasanstha@gmail.com">ashrayasanstha@gmail.com</a>		
<b>Type of Institution</b>			<b>Balsadan</b>		
Run by			-		
Year of Establishment of the Home			1988		
Supported by			State Govt. & Community Participation		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			40		
b) Present Strength			30		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			Unable to provide care and Protection		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	3	6	9	
c)	10-15 years	-	15	15	

d)	15-18 years	-	6	6	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	3	27	30	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			Education, Sanitary, Entertainment, Accommodation		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			Affiliation with Balgram Maharashtra		
Whether the Institution is certified as Fit Institution by					
c)	Juvenile Justice Board	-			
d)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Education, Sanitary, Entertainment, Accommodation		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	275	40	30
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	1	65	40	30
h)	Counseling & Guidance room	-	-	-	-

i)	Office rooms	1	115	4	4
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys	4	100	-	6
l)	Separate Latrines for boys	6	100	-	6
m)	Store room	1	120	-	-
n)	Play Ground	-	3000	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)

-

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light

Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	M.S.W.	5,500 /-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	-	M.S.W.	4,000/-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	2	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	1	-	-	2,400/-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	M. Sc. IT	1,700/-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	7 <sup>th</sup>	750	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	-	-	750	-
r)	Any other (Please Specify)					
	Total	8	-	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes

Yes

If Yes Please mention

By Juvenile Welfare Board

Whether the organization maintains any specific Proforma for recording details of Information of every child

Yes

If Yes, what kind of information you have collected from children		-	
<b>Maintenance of Registers/Record Maintenance</b>			
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register	<input checked="" type="checkbox"/>	
b)	Individual Care Plan	<input checked="" type="checkbox"/>	
c)	Supervision register	<input checked="" type="checkbox"/>	
d)	Medical file or medical report	<input checked="" type="checkbox"/>	
e)	Nutrition diet file	-	
f)	Stock Register	<input checked="" type="checkbox"/>	
g)	Visitor's book	<input checked="" type="checkbox"/>	
h)	Case file	<input checked="" type="checkbox"/>	
i)	Inquiry report file	<input checked="" type="checkbox"/>	
j)	Stock register	<input checked="" type="checkbox"/>	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
Health related services available for Children		First Aid	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		24 hours	
Frequency of Doctor's visit		Twice in a week	
Whether any trained Staff for first-aid		Yes	
<b>Referral of Cases</b>			
a)	Govt. Hospital	<input checked="" type="checkbox"/>	
b)	Dispensary	-	
c)	Any other: Private Hospitals	<input checked="" type="checkbox"/>	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As per guide line of concerning Doctor	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Yearly

b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	4	Yearly
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	1	Yearly
h)	Pillow	-	-
i)	Shoes/Chappal	2	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	48 gm	Monthly
l)	Oil	75 gm	Monthly
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	√	-
h)	Bridge Course	-	-
i)	Any other: ITI	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	1	-	-	-	Near	Foot
b)	Primary	21	-	-	-	¼ km	Foot
c)	Secondary	7	-	-	-	½ km	Foot
d)	Higher	1	-	-	-	4 km	Bike
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month N.A.

Whether the educational facilities are adequate for children -

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	4	-	4	Formal Edu.
d)	Jute bags and 'moti' work	-	-	-	-

e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any Other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		Yearly	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Stories, Novels etc.	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	



f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	-
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	-
h)	Sufficient space for washing	-
i)	Clean and fly-proof kitchen	-
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Interaction Type
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Local Help Group, Lions, Rotary etc.
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Secretary Attended Workshop and Trafficking at Delhi
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ NGO ★ Govt. Institution of District, Balgram Maharashtra Institute
Suggestion of CWC/Inspection Committee		Satisfactory Report
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

<b>MH/11/ NGO/71</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Udgir Taloka Yuva Vikas Sanstha	
Address for Communication	Moulana Azad Balsadan, Noor Patel Colony, Shelhal Road	
Telephone (with STD code)	02385-257832	
Fax	-	
Email ID	rajapatel_malik@yahoo.co.in	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Shaikh Sattar Karimsaab 9421364238	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	Udgir, Dist. Latur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	6 <sup>th</sup> January 1995	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
06-01-1995	MH / 3918	Latur
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	10	
Total No. of Professional Staff		
a) Male	4	
b) Female	6	
Total number of		
a) Full Time	8	
b) Part time Staff	2	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
9,28,561		4,85,007		4,44,457	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	√	-	-	√	-
DOCUMENTATION					
Documents/communication material maintained at the organizational level			Annual Report, Brochure, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>			Moulana Azad Balsadan		
Contact Details					
a) Name of Superintendent/Secretary			Shaikh Sattar Karimsaab		
b) Address			Noor Patel Colony, Shelhal Road		
c) Phone			02385-257832		
d) Fax			-		
e) Email			rajapatel_malik@yahoo.co.in		
<b>Type of Institution</b>			Children Home		
Run by			NGO (Udgir Taloka Yuva Vikas Sanstha)		
Year of Establishment of the Home			1995		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			100		
b) Present Strength			100		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			Orphanage		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	15	50	65	
c)	10-15 years	5	15	20	
d)	15-18 years	3	12	15	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	

c)	6-12 month	-	-	-	
d)	1-2 years	3	10	13	
e)	2-3 years	5	11	16	
f)	3-4 years	6	34	40	
g)	4-5 years	6	3	9	
h)	More than 5 Years	3	19	22	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
Facilities and support services provided for the children staying in Home			Education, Food, Clothes, Accommodation		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	-	-
b)	Classrooms	8	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys	11	-	-	-
l)	Separate Latrines for boys	14	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)	5560 Sq. Ft
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	Yes

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	2,000 /-	2003
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	1	1	12 <sup>th</sup>	1,500/-	2003
e)	Doctor (Part time or Full time)	1	1	B.A. M.S.	500/-	2003
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	3	3	12 <sup>th</sup>	1,500/-	2005
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	2	7 <sup>th</sup>	1,000/-	2003
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	10 <sup>th</sup>	1000/-	2003
q)	Sweeper	1	1	7 <sup>th</sup>	1000/-	2008
r)	Any other (Please Specify)	-	-	-		
	Total	10	10	-	12,500 /-	-

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Destitute, Orphanage, BPL
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

**Maintenance of Registers/Record Maintenance**

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>

d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

Health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	Weekly
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	√
c) Any other:	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three
What types of special diet is provided for sick infant or children	As per guide line of concerning Doctor
How many cooks are there	Two
Whether children are helping at the time of cooking in any way	Yes
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	2	Yearly
e)	Towel	2	Yearly
f)	Durry	1	Yearly
g)	Blanket	1	Yearly
h)	Pillow	-	-

i)	Shoes/Chappal	1	Yearly
j)	Tooth powder/paste	1	Monthly
k)	Soap	2	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	3	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other: ITI	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	65	50	15	Private	1 km	Foot
c)	Secondary	28	20	8	Private	1 km	Foot
d)	Higher	7	7	-	Private	3 km	Cycle
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month N.A.

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-

k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any Other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Monthly	
b)	Outdoor games	-		-	
c)	Music	√		Monthly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	-		-	
i)	Debates	√		Every 6 Month	
j)	Radio	-		-	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				6:00 a.m. to 10:00 p.m.	
What types of books provide for Children				Education Syllabus Books	
<b>SANITATION AND HYGIENE FACILITIES</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					



Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What types of Co-operation and Co-ordination received for homes	CWC
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Training Programme for staff conducted by CWC in collaboration of UNICEF-3days Training
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ CWC ★ Govt. Hospital ★ NGO's
Suggestion of CWC/Inspection Committee	★ Keep Premises neat and clean
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	★ Child Rights ★ Health, Hygiene of Children ★ Placement of Trained Adults

*Manipur*

<b>MN/01/GO/72</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		<b>Destitute Children Home</b>		
Contact Details				
a) Name of Superintendent/Secretary		K. Lalbiaksanga		
b) Address		The Salvation Army, Muolvaiphei, Bible Hill, Ccpur		
c) Phone		9612483425		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		Social Welfare, Govt. of Manipur		
Year of Establishment of the Home		1985		
Supported by		State Government		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		50		
b) Present Strength		50		
Number of Children lodged in the home having families residing in the same State/UT		50		
Reasons for staying in the home in case of children having families (provide details)		The family are too weak to support them		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	10	10
b)	5-10 years	-	23	23
c)	10-15 years	-	13	13
d)	15-18 years	-	4	4
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-

b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			Feeding, Studies.			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-			
Any other registration			-			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided			Feeding Studies etc.			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	1	-	25	40	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	1	-	-	-	
i)	Office rooms	1	-	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	1	-	-	-	
l)	Separate Latrines for boys and girls	1	-	-	-	
m)	Store room	1	-	-	-	
n)	Play Ground	1	-	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				3 hectares		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per	Associated with the Institution (Month/

					month	Year)
a)	Superintendent/ Project Manager	1	1	B.A.	25,000	-
b)	Social Welfare Officer	1	-	-	-	-
c)	Counselor	1	-	-	15,000	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	1	-	-	10,500	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	1	-	-	15,000	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	15,000	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	-	-	10,500	-
q)	Sweeper	-	-	-	-	-
r)	Any other	-	-	-	-	-
	Total	7	-	-	91,000	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	No
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	<input type="checkbox"/>

#### Minimum Standard of Care

<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Sometime	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		-	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	-
b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	2	-
d)	Under garments	2	-
e)	Towel	1	-
f)	Durry	1	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/ Chappal	2	-
j)	Tooth powder/paste	1	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	1	-
<b>EDUCATION</b>			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			
S.No	Formal School on Premises	Yes	No

a)	Pre-school				√		-
b)	Primary				-		-
c)	Secondary				-		-
d)	Higher				-		-
e)	Non-formal classes				-		-
f)	Private coaching				-		-
g)	Bridge Course				-		-
h)	Any other				-		-
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	10	-	-	-	-	-
b)	Primary	23	-	-	-	-	-
c)	Secondary	17	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					-		
If Yes, details of qualification					-		
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					-		

Difficulty (if any)		-	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	-
b)	Outdoor games	√	-
c)	Music	-	-
d)	Television	√	-
e)	Picnic	-	-
f)	Outings	-	-
g)	Cultural Programme	-	-
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		-	
If Yes, Opening timing or day		-	
What types of books provide for Children		-	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	-	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes	
What type of Co-operation and Co-ordination has been received for homes		Cash, Kind and Donation	
<b>MONITORING AND EVALUATION</b>			
Mechanism used by the Institution to monitor the activities of homes		-	
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No	



If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Seminar and other training programme organised by Child Welfare Committee under the Supervision of Social Welfare, Government of Manipur
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	★ They may visit the home more regularly in future to experience the problems faced by the home
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>MN/01/ NGO/73</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Destitute Children Home Liwa Changniag sponsored by Liwa Changniag Women Society	
Address for Communication	Liwa Changniag, P.O. Liwa Changniag	
Telephone (with STD code)	9862882039	
Fax	Nil	
Email ID	Nil	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Ts. Morison	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	Education, Shelter and Child Care	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	10 February, 1974	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under Societies Registration Act XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
22 August, 1974	1410	Imphal
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No. 55, May 5, 2007	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	14	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	14	
Total No. of Professional Staff		
a) Male	8	
b) Female	6	
Total number of		
a) Full Time	9	

b) Part time Staff		5			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
5,25,726.85		5,89,452.35		3,76,686.90	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	√	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Destitute Children Home		
Contact Details					
f) Name of Superintendent/Secretary			Ts. Tennyson		
g) Address			Liwa Changniag		
h) Phone			8014762251		
i) Fax			-		
j) Email			-		
<b>Type of Institution</b>			<b>Children Home</b>		
Run by			State Government (Social Welfare Department, Govt. Manipur)		
Year of Establishment of the Home			10 February, 1975		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			50		
b) Present Strength			50		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	9	9	
b)	5-10 years	-	14	14	
c)	10-15 years	-	15	15	
d)	15-18 years	-	12	12	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	

b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	8	8
f)	3-4 years	-	12	12
g)	4-5 years	-	13	13
h)	More than 5 Years	-	17	17

Number of “Children with special needs” in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home N.A.

Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960 No

Any other registration -

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board -

b) Child Welfare Committee ✓

If Yes, Please Specify the Facilities provided -

**INFRASTRUCTURE**

Infrastructure available

a) Owned ✓

b) Rented -

c) Lease -

d) Donated -

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	1	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	2	-	-	-
l)	Separate Latrines for boys and girls	2	-	-	-

m)	Store room	1	-	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	0	-	-	-
Total area of the Campus (Sq. ft.)				34,800 Sq. Fts	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	15,000	-
b)	Social Welfare Officer	0	0	-	-	-
c)	Counselor	1	1	B.A.	10,000	-
d)	Case Worker	1	1	-	10,000	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	8,000	-
f)	Paramedical Staff	1	1	Nursing	5,000	-
g)	Educator	1	1	M.A.	4,000	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	B.A.	8,000	-
j)	Music Teacher	1	1	P.U.	-	-
k)	Sports/ Yoga Teacher	1	1	10 <sup>th</sup>	4,000	-
l)	Driver	0	0	-	-	-
m)	Cook	1	1	8 <sup>th</sup>	3,000	-
n)	House Aunty	2	2	-	8,000	-
o)	Security Guard	0	0	-	-	-
p)	Helper	1	1	7 <sup>th</sup>	2,000	-
q)	Sweeper	1	1	6 <sup>th</sup>	2,000	-
r)	Any other (Please Specify)	0	0	-	-	-
Total		14	14	-	-	-

**CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Destitute
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

**Maintenance of Registers/Record Maintenance**

S. No.	Details of Register	Please tick <input type="checkbox"/>
--------	---------------------	--------------------------------------

a)	Admission and discharge register	√
b)	Individual Care Plan	-
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	-
b) Dispensary	√
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	-
Any specialized services are provided for them	No
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Twice
What types of special diet is provided for sick infant or children	-
How many cooks are there	One
Whether children are helping at the time of cooking in any way	Yes
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	2	Year
d)	Under garments	2	Year
e)	Towel	2	Year

f)	Durry	2	Year
g)	Blanket	2	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	2	Year
j)	Tooth powder/paste	1	Month
k)	Soap	1	Month
l)	Oil	1	Month
m)	Utensils (Plate and Glass)	2	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	√	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	8	8	-	-	½ km	By walk
b)	Primary	12	12	-	-	-	-
c)	Secondary	30	30	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month Rs. 60

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/	-	-	-	-

	mobile repairing				
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms			Yes	



	(at least one bathroom for ten children)	
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	-
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Life skill education and child counseling organised by coalition on children's right to protection (CCRP) Manipur.
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		★ Set up vocational training ★ To Organise Training Programme Yearly
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Guwahati

<b>MN/02/ NGO/74</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Meetei Phurup	
Address for Communication	Sagolband Teva Keithal, Imphal	
Telephone (with STD code)	09856288781	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	A. Tomba Meetei Phurup	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	Sagolband Tera Keithal, Imphal	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	25 <sup>th</sup> May, 1959	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
25 <sup>th</sup> May, 1974	614/1965	Imphal (Manipur)
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	194130007	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No. 55, May 5, 2007	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	14	
Total No. of Professional Staff		
a) Male	7	
b) Female	7	
Total number of		
a) Full Time	9	
b) Part time Staff	5	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
6,50,000		6,20,649		3,83,402	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	√	-	√	-
DOCUMENTATION					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>				Destitute Children Home, Tera Keithal	
Contact Details					
a) Name of Superintendent/Secretary				Ngangbam	
b) Address				Sagolband Tera Keithal	
c) Phone				9856288781	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				State Government (Social Welfare Department, Govt. Manipur)	
Year of Establishment of the Home				10 <sup>th</sup> June, 1977	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				50	
b) Present Strength				50	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				Destitute Children	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	5	5	
b)	5-10 years	-	11	11	
c)	10-15 years	-	20	20	
d)	15-18 years	-	14	14	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	

d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	5	5	
h)	More than 5 Years	-	45	45	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			Department of Social Welfare , Govt. of Manipur		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	6	2400	50	-
b)	Classrooms	2	1000	-	-
c)	Sick room/ First Aid Room	1	450	50	-
d)	Kitchen	1	120	50	-
e)	Dinning Hall	1	450	50	-
f)	Recreation room	1	800	50	-
g)	Library	1	360	50	-
h)	Counseling & Guidance room	1	144	50	-
i)	Office rooms	1	360	50	-
j)	Workshops	1	120	4	-
k)	Separate Bathrooms for boys and girls	2	60	3	-
l)	Separate Latrines for boys and girls	4	64	4	-
m)	Store room	1	144	50	-

n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	1	120	4	-
Total area of the Campus (Sq. ft.)-				6,400 Sq. Fts	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	15,000	-
b)	Social Welfare Officer	Nil	Nil	Nil	Nil	-
c)	Counselor	1	1	B.A.	10,000	-
d)	Case Worker	1	1	B.A.	10,000	-
e)	Doctor (Part time or Full time)	2	2	M.D.	8,000	-
f)	Paramedical Staff	1	1	B.Sc. (Nursing)	5,000	-
g)	Educator	1	1	B.A.	5,000	-
h)	Vocational Instructor	1	1	8 <sup>th</sup>	2,000	-
i)	Store-keeper cum Accountant	1	1	B.A.	8,000	-
j)	Music Teacher	1	1	12 <sup>th</sup>	4,000	-
k)	Sports/ Yoga Teacher	1	1	12 <sup>th</sup>	4,000	-
l)	Driver	Nil	Nil	Nil	Nil	-
m)	Cook	1	1	10 <sup>th</sup>	3,000	-
n)	House Aunty	1	1	B.A.	8,000	-
o)	Security Guard	Nil	Nil	Nil	Nil	-
p)	Helper	1	1	5 <sup>th</sup>	2,000	-
q)	Sweeper	1	1	12 <sup>th</sup>	2,000	-
r)	Any other (Please Specify)	Nil	Nil	Nil	Nil	-
Total		14	14	-	1,58,000	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Destitute Children
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>

b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	√

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Yes
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	N.A.
Frequency of Doctor's visit	N.A.
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	√
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	Higher Vehicle

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three
What types of special diet is provided for sick infant or children	As advice to Doctor
How many cooks are there	Three
Whether children are helping at the time of cooking in any way	-
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Y
b)	Winter Clothing(Jersey)	1	Y
c)	School Uniform	1	Y
d)	Under garments	1	Y
e)	Towel	2	Y
f)	Durry	1	Y

g)	Blanket	1	Y
h)	Pillow	1	Y
i)	Shoes/Chappal	1	Y
j)	Tooth powder/paste	150 gm	M
k)	Soap	150 gm	M
l)	Oil	150 gm	M
m)	Utensils (Plate and Glass)	2 Sets	Y

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	2	2	-	-	-	-
b)	Primary	13	13	-	-	-	-
c)	Secondary	35	35	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month Rs. 16

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	16	-	16	6 Months
b)	Beauty Culture	-	-	-	-
c)	Computer	3	-	3	3Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-

i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				8 <sup>th</sup>	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Yearly	
b)	Outdoor games	-		-	
c)	Music	√		Yearly	
d)	Television	√		Yearly	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Yearly	
i)	Debates	√		Yearly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Need to children	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			No	



h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		-
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		4
b) Details of Training Programmes		Social Welfare Department
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
<b>DEPARTMENT/AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Guwahati

<b>MN/03/ NGO/75</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Manipur Mahila Kalyan Samiti	
Address for Communication	Kaboleikai, Dewlahland, Imphal-795001	
Telephone (with STD code)	(0385) 2421294	
Fax	Nil	
Email ID	<u>Mmks.imphal@gmail.com</u>	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	S. Sharaju Devi	
Vision of NGO	A Child Friendly Welfare Society	
Mission of NGO	Uplifting the lives of marginalized women and children	
Key Objectives	Welfare of Women and Children	
Major Activities	Children Home, Child line and CCRP (CRY Project)	
Target group/ Stakeholders	Children	
Geographical location/area	Imphal City (Manipur)	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	11 <sup>th</sup> September 1965	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Act XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
21-03-1996	681/1966	Imphal (Manipur)
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	194130137	
Any other Registration/ Recognition with Central / State Govt.:	Yes, under Income Tax (12-A)	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	Published in Manipur, Gazetter No. 55 of 5/5/07	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	17	
Physical Assets of the Organization	Half area of land with building and furniture.	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	20	
Total No. of Professional Staff		
a) Male	10	

b) Female		10			
Total number of					
a) Full Time		14			
b) Part time Staff		6			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09	2007-08		
17.45		17.83	21.5		
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) CRY, Project
-	√	√	√	√	√
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Leaflet, Pamphlet, Paper Cutting of Important News and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			MMKS Children Home		
Contact Details					
a) Name of Superintendent/Secretary			Kableikai, Dewlahl, Near Cemetery, Imphal		
b) Address			S. Sharaju Devi		
c) Phone			(0385)(2412129)		
d) Fax			Nil		
e) Email			<a href="mailto:Mmks.imphal@gmail.com">Mmks.imphal@gmail.com</a>		
<b>Type of Institution</b>			<b>Children Home</b>		
Run by			Manipur Mahila Kalyan Samiti		
Year of Establishment of the Home			1971 (14-11-1971)		
Supported by			State Govt. and Central Govt. Share		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			50		
b) Present Strength			50		
Number of Children lodged in the home having families residing in the same State/UT			10		
Reasons for staying in the home in case of children having families (provide details)			Destitute Children having single with BPL family background.		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	Nil	Nil	
b)	5-10 years	-	18	18	
c)	10-15 years	-	28	28	

d)	15-18 years	-	04	04	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	1	1	
b)	4-6 month	-	1	1	
c)	6-12 month	-	3	3	
d)	1-2 years	-	11	11	
e)	2-3 years	-	10	10	
f)	3-4 years	-	9	9	
g)	4-5 years	-	7	7	
h)	More than 5 Years	-	8	8	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			N.A.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			Registered under Section 12-A of Income Tax		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			A Child friendly supportive environment by ensuring basic child rights in accordance to CRC, JJ Act, 2000 (Ammended 2006) and State Rules.		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	2000	2000	2000
b)	Classrooms	1	150	300	150
c)	Sick room/ First Aid Room	1	150	300	150
d)	Kitchen	1	250	250	250
e)	Dinning Hall	1	300	800	300
f)	Recreation room	1	200	300	200

g)	Library	1	150	500	150
h)	Counseling & Guidance room	0	0	120	0
i)	Office rooms	1	200	300	200
j)	Workshops	0	0	1125	0
k)	Separate Bathrooms for boys and girls	1	25	125	25
l)	Separate Latrines for boys and girls	4	100	200	100
m)	Store room	1	200	250	200
n)	Play Ground	2	5500	-	5500
o)	Vocational Training Centre	1	150	-	150

Total area of the Campus (Sq. ft.)

½ Acre

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light

Yes

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A. Sociology	15,000	-
b)	Social Welfare Officer	0	-	-	-	-
c)	Counselor	1	1	Graduate	10,000	-
d)	Case Worker	1	1	-	10,000	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	8,000	-
f)	Paramedical Staff	1	1	Diploma	5,000	-
g)	Educator	1	1	Graduate	4,000	-
h)	Vocational Instructor	1	1	-	4,000	-
i)	Store-keeper cum Accountant	1	1	M. Com.	8,000	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	1	1	Diploma	4,000	-
l)	Driver	-	1	Matriculate	3,000	-
m)	Cook	1	1	8 <sup>th</sup>	3,000	-
n)	House Aunty	2	2	-	5,000	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	8 <sup>th</sup>	2,000	-
q)	Sweeper	-	-	-	-	-
r)	Any other House Keeper	1	1	8 <sup>th</sup>	2,000	-
	Total	14	15	-	-	-

### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes	
If Yes Please mention	Deserving CNCP recommended by CWC and local Voluntary Organisations any individual.	
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes	
If Yes, what kind of information you have collected from children	Detail Case history of children and families.	
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	$\checkmark$
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	$\checkmark$
j)	Stock register	$\checkmark$
k)	Any other Educational File	$\checkmark$
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children	Regular Check-up	
Does the home have a Medical Care Unit for health check-up of Children	Yes	
If yes, Opening of day, time and duration of MCU	-	
Frequency of Doctor's visit	Twice in a month	
Whether any trained Staff for first-aid	Yes	
<b>Referral of Cases</b>		
a)	Govt. Hospital	$\checkmark$
b)	Dispensary	-
c)	Any other Private Practitioners and Private Hospital	$\checkmark$
How many children are suffering from communicable diseases and HIV/AIDS	None	
Any specialized services are provided for them	No	
If yes, Please provide in details	N.A.	
Whether ambulance facility is available for patients	No	
Any other Facilities	Emergency medical attention	
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes	Yes	
How many times meals are provided in a day	Three	

What types of special diet is provided for sick infant or children					As recommended by Doctor/ Dietician		
How many cooks are there					One		
Whether children are helping at the time of cooking in any way					No		
Whether any Nutrition and Child Development Officer is there					Yes		
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item				Number	Frequency (Month/Year)	
a)	Summer Clothing				4	Y	
b)	Winter Clothing(Jersey)				2	Y	
c)	School Uniform				3	Y	
d)	Under garments				5	Y	
e)	Towel				2	Y	
f)	Durry				1	Y	
g)	Blanket				4	Y	
h)	Pillow				2	Y	
i)	Shoes/Chappal				2	Y	
j)	Tooth powder/paste				150 gm	M	
k)	Soap				150 gm	M	
l)	Oil				150 gm	M	
m)	Utensils (Plate and Glass)				2 Sets	Y	
<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
a)	Formal School on Premises				Yes	No	
b)	Pre-school				√	-	
c)	Primary				-	√	
d)	Secondary				-	√	
e)	Higher				-	√	
f)	Non-formal classes				√	-	
g)	Private coaching				√	-	
h)	Bridge Course				√	-	
i)	Any other				-	√	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	2	2	-	Private	400 m	By Walk
b)	Primary	32	32	-	Private	500 m	By Walk
c)	Secondary	15	15	-	Govt.	600 m	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	1	1	-	Private	0	Inside own insitute
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						Yes	
If Yes, then how much per child month						Rs. 2000	
Whether the educational facilities are adequate for children						No	

If No, what are the other facilities required					Need adequate fund provision
<b>VOCATIONAL TRAINING</b>					
Whether the homes have vocational training facilities for children					Yes
If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	10	-	10	6 Months
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	--	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	2	-	2	6 Months
o)	Any other	-	-	-	-
Whether instructors are trained					Yes
If Yes, details of qualification					Diploma in the encountered Trade
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					Yes
Difficulty (if any)					Irregularities in fund flow from Government.
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					Yes
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Quarterly	
g)	Cultural Programme	√		Quarterly	
h)	Yoga	√		Daily	
i)	Debates	√		Quarterly	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not					Yes



If Yes, Opening timing or day		4:00 p.m. to 6:00 p.m.
What types of books provide for Children		Newspaper, Comics, Stories Books, Encyclopedia, etc.
<b>SANITATION AND HYGIENE</b>		
Whether Sanitation and Hygiene is maintained in the home through following facilities		
S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	-
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	No
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	No
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Financial, Legal and Women Resources.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Small team/ Core Group of Marks held sitting on monthly basis.
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		On 2 <sup>nd</sup> December, 2010 by Member Secretary, CWC- Imphal East
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a)	Number of Training Programmes organized	6
b)	Details of Training Programmes	<ul style="list-style-type: none"> <li>➔ Sensitization of JJ Act, 2000 (Amended in 2006)</li> <li>➔ Other relevant instruments like CRC, Indian Constitution, etc</li> <li>➔ Child Trafficking</li> </ul>
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		N.A.

<p>Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities</p>	<ul style="list-style-type: none"> <li>★ Department of Social Welfare, Manipur</li> <li>★ Police Department, Manipur</li> <li>★ Childline India Foundation, Mum dai/ Kolkata</li> <li>★ CRY- Child Rights and You, Kolkata</li> <li>★ Rotary Club, Imphal</li> <li>★ Lion's Club, Imphal</li> <li>★ Manipur Alliance for Child Rights (MACR)</li> </ul>
<p>Suggestion of CWC/Inspection Committee</p>	<ul style="list-style-type: none"> <li>★ To work in accordance to JJ Act, 2000 (Amemndment-2006), CRC and State Rules, 2003</li> </ul>
<p>Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities</p>	<ul style="list-style-type: none"> <li>★ Capacity building of Staff in handling the Institution.</li> </ul>

<b>MN/04/ NGO/76</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Lower Lamka Women Society	
Address for Communication	S.A. Road, Churachandpur, Manipur-795128	
Telephone (with STD code)	9862882079	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	K.C. Sapruala	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	East of Churachandpur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	19 <sup>th</sup> July, 1980	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	3136 of 1980	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
19-July-1980	3136 of 1980	Imphal
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	194140009	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	Published in Manipur, Gazetter No. 55 of 5/5/07	
If No, give reasons thereof	-	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	14	
Total No. of Professional Staff		
a) Male	9	
b) Female	5	
Total number of		
a) Full Time	10	

b) Part time Staff		4			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
6,85,577		6,50,000		6,30,019	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	√	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Destitute Children Home	
Contact Details					
a) Name of Superintendent/Secretary				L. Biakchhungi	
b) Address				S. A. Road, Churachandpur	
c) Phone				9862882079	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO, Lower Lamka Women Society	
Year of Establishment of the Home				1980	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				50	
b) Present Strength				50	
Number of Children lodged in the home having families residing in the same State/UT				50	
Reasons for staying in the home in case of children having families (provide details)				Destitute/ Orphans	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	20	7	27	
c)	10-15 years	21	2	23	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	

c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	30	9	39	
f)	3-4 years	11	-	11	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home		-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960		No			
Any other registration		-			
Whether the Institution is certified as Fit Institution by					
c)	Juvenile Justice Board	-			
d)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided		-			
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	0	-	-	-
b)	Classrooms	0	-	-	-
c)	Sick room/ First Aid Room	0	-	-	-
d)	Kitchen	1	12 * 20	50	50
e)	Dinning Hall	1	15 * 45	50	50
f)	Recreation room	0	-	-	-
g)	Library	0	-	-	-
h)	Counseling & Guidance room	1	15 * 20	5	5
i)	Office rooms	1	15 * 20	10	10
j)	Workshops	0	-	-	-
k)	Separate Bathrooms for boys and girls	2	8 * 8 8 * 8	2	2
l)	Separate Latrines for boys and girls	2	5 * 8 8 * 8	2	2
m)	Store room	1	10 * 15	-	-

n)	Play Ground	0	-	-	-
o)	Vocational Training Centre	0	-	-	-
Total area of the Campus (Sq. ft.)				140 * 50	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Graduate	15,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	Graduate	10,000	-
d)	Case Worker	1	1	Graduate	10,000	-
e)	Doctor (Part time or Full time)	2	2	M.B.B.S.	8,000	-
f)	Paramedical Staff	1	1	12 <sup>th</sup>	5,000	-
g)	Educator	1	1	Graduate	4,000	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	Graduate	8,000	-
j)	Music Teacher	1	1	12 <sup>th</sup>	4,000	-
k)	Sports/ Yoga Teacher	1	1	12 <sup>th</sup>	4,000	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	8 <sup>th</sup>	3,000	-
n)	House Aunty	1	1	8 <sup>th</sup>	8,000	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	8 <sup>th</sup>	2,000	-
q)	Sweeper	1	1	8 <sup>th</sup>	2,000	-
r)	Any other	-	-	-	-	-
	Total	14	14	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Destitute/ Orphan
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Personal Information

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>

b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	√
e)	Nutrition diet file	-
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Weekly Check-up
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	Once a week
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	-
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Twice a day
What types of special diet is provided for sick infant or children	Milk and Bread
How many cooks are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Yearly
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	3	Yearly
e)	Towel	2	Yearly
f)	Durry	1	Yearly

g)	Blanket	2	Yearly
h)	Pillow	2	Yearly
i)	Shoes/Chappal	1/1	Yearly
j)	Tooth powder/paste	2	Yearly
k)	Soap	4	Yearly
l)	Oil	4	Yearly
m)	Utensils (Plate and Glass)	6	Yearly

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	√	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	13	4	9	Govt.	1 km	By Walk
c)	Secondary	30	5	25	Govt.	1 km	By Walk
d)	Higher	7	-	7	Govt.	1 km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month Rs. 10

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	--	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/mobile repairing	-	-	-	-



i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	-		-	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	√		Yearly	
g)	Cultural Programme	-		-	
h)	Yoga	√		Weekly	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			No	

h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Three Day State Level Training Programme on Implementation of Juvenile Justice (Care and Protection) Act, 2000
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>MN/05/ NGO/77</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Kanglatongbi Children Home	
Address for Communication	K. Orphanage Village, P.O. Motbung Dist.	
Telephone (with STD code)	9612127520	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sh. Chungron	
Vision of NGO	-	
Mission of NGO	To organise to look after them, give them shelter, food and clothing	
Key Objectives	To ameliorate the condition of poor children and their physically handicapped person	
Major Activities	The activities of the orphan will be on regional as well as functional basis.	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1947 - 48	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
28-02-1955	3 of 1954-55	Kanglatongbi
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	N.A.	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	Manipur, Gazette No. 55 of 5/5/07	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	7	
Physical Assets of the Organization	Enough space and adequate furniture	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	20	
Total No. of Professional Staff		
a) Male	10	

b) Female	4				
Total number of					
a) Full Time	11				
b) Part time Staff	3				
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
-		-		-	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	√	√	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Kanglatongbi Children Home	
Contact Details					
a) Name of Superintendent/Secretary				Haoneo Haokip	
b) Address				Kanglatongbi Children Home	
c) Phone				9612127520	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO, Kanglatongbi Children Home	
Year of Establishment of the Home				1947-48	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				100	
b) Present Strength				60	
Number of Children lodged in the home having families residing in the same State/UT				55 and other 5 from other state	
Reasons for staying in the home in case of children having families (provide details)				Orphan and poor family	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	5	20	25	
c)	10-15 years	6	15	21	
d)	15-18 years	4	10	14	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	

		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	15	45	60	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			N.A.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			Registered under JJ Act, 2000		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Safe and Secure environment for all children for their all round development		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	20/30	100	60
b)	Classrooms	4	18 * 20	80	40
c)	Sick room/ First Aid Room	1	10 * 15	5	3
d)	Kitchen	1	28 * 25	5	3
e)	Dinning Hall	1	16 * 50	100	60
f)	Recreation room	1	15 * 18	20	10
g)	Library	1	15 * 20	30	20
h)	Counseling & Guidance room	1	10 * 15	15	10
i)	Office rooms	1	15 * 15	15	10
j)	Workshops	1	18 * 35	20	10
k)	Separate Bathrooms for boys	4	15/20	7	7

	and girls				
l)	Separate Latrines for boys and girls	8	15/20	7	7
m)	Store room	1	15/25	2	1
n)	Play Ground	1	100/180	20	20
o)	Vocational Training Centre	1	18/35	60	40
Total area of the Campus (Sq. ft.)				2400 Sq. Ft	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	15,000	-
b)	Social Welfare Officer	1	1	M.A.	10,000	-
c)	Counselor	1	1	M.A.	10,000	-
d)	Case Worker	1	1	-	8,000	-
e)	Doctor (Part time or Full time)	1	1	-	8,000	-
f)	Paramedical Staff	1	1	-	5,000	-
g)	Educator	1	1	-	4,000	-
h)	Vocational Instructor	1	1	-	-	-
i)	Store-keeper cum Accountant	1	1	-	8,000	-
j)	Music Teacher	1	1	-	4,000	-
k)	Sports/ Yoga Teacher	1	1	-	4,000	-
l)	Driver	1	1	-	-	-
m)	Cook	1	1	-	3,000	-
n)	House Aunty	1	1	-	8,000	-
o)	Security Guard	1	1	-	2,000	-
p)	Helper	1	1	-	2,000	-
q)	Sweeper	1	1	-	-	-
r)	Any other	-	-	-	-	-
	Total	17	17	-	-	-

#### **CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Referred by CWC and application form
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Detail Personal Information

Maintenance of Registers/Record Maintenance			
S. No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	$\checkmark$	
c)	Supervision register	$\checkmark$	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	$\checkmark$	
f)	Stock Register	$\checkmark$	
g)	Visitor's book	$\checkmark$	
h)	Case file	$\checkmark$	
i)	Inquiry report file	$\checkmark$	
j)	Stock register	$\checkmark$	
k)	Any other	-	
Minimum Standard of Care			
MEDICAL CARE			
What are the health related services available for Children		Free Medical Camp	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		N.A.	
Frequency of Doctor's visit		Twice in a month	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	$\checkmark$	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for them		No	
If yes, Please provide in details		N.A.	
Whether ambulance facility is available for patients		No	
Any other Facilities		N.A.	
NUTRITION AND DIET SCALE			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Twice a day	
What types of special diet is provided for sick infant or children		As advised by dietician	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		Yes	
CLOTHING AND BEDDING			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	6	Year
b)	Winter Clothing(Jersey)	2	Year

c)	School Uniform	1	Year
d)	Under garments	9	Year
e)	Towel	2	Year
f)	Durry	1	Year
g)	Blanket	2	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	2	Year
j)	Tooth powder/paste	1	Year
k)	Soap	3	Year
l)	Oil	1	Year
m)	Utensils (Plate and Glass)	1	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	√	-
f)	Non-formal classes	√	-
g)	Private coaching	√	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	10	7	3	Govt.	5 km	By Walk
d)	Higher	5	3	2	Govt.	3 km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month Rs. 150

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	15	5	20	3 Month
b)	Beauty Culture	-	-	-	-
c)	Computer	20	10	30	1 Year
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-



f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	5	-	5	1 Year
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	10	10	20	1 Month
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Diploma	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				Shortage of finance	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Weekly	
i)	Debates	√		Yearly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				4:00 p.m. – 6:00 p.m. Daily	
What types of books provide for Children				News, Magazines, Children Books.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	

f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	No
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	No
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	-
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Contribution Gift
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Decided by M.C. from time to time
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		N.A.
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		5
b) Details of Training Programmes		Basic Child Right and JJ Act.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		N.A.
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		<ul style="list-style-type: none"> <li>★ Churches</li> <li>★ Individuals</li> <li>★ Student Organisation</li> <li>★ Businessmen</li> </ul>
Suggestion of CWC/Inspection Committee		★ Neat 2 Cleanliness
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Child Rights and Child Care Programme

<b>MN/06/ NGO/78</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Leprosy Patients Welfare Society	
Address for Communication	Lei-Ingkhol, Chingmeirong, P.O. Mantripukhri – 795002, Manipur	
Telephone (with STD code)	0385-2056336	
Fax	-	
Email ID	<a href="mailto:lews2003man@yahoo.co.in">lews2003man@yahoo.co.in</a>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	A. Tolen Singh, Secretary	
Vision of NGO	→ To Uplift the down trodden people	
Mission of NGO	→ To maintain Home for Orphans → To run hospital for stigmatized diseases like Leprosy, HIV affected Patients.	
Key Objectives	→ To Educate and trained above mentioned Stigmatized Patients (Leprosy and HIV Affected) and Orphans	
Major Activities	→ To give general education and vocational training → To give Hospital treatment and home base care to HIV, Leprosy Patients	
Target group/ Stakeholders	Children	
Geographical location/area	Imphal East	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1976	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
1-12-1978	1855 of 1978	Imphal
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	194130008	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No. 6/15/2006 S(SW) dt. 29/1/2007	
If No, give reasons thereof	-	

Number of Governing Body Members		7			
Physical Assets of the Organization		Children Home, One Hospital Buildings, Beds, Almirah, Equipments etc.			
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization		25			
Total No. of Professional Staff					
a) Male		13			
b) Female		12			
Total number of					
c) Full Time		23			
d) Part time Staff		2			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
37,30,439		29,35,953		37,80,648	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	√	√	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Destitute Children Home		
Contact Details					
a) Name of Superintendent/Secretary			A.Tolen Singh,		
b) Address			Lei-Ingkhol		
c) Phone			0385-2056336		
d) Fax			-		
e) Email			Lews2003man@ yahoo.co.in		
<b>Type of Institution</b>			<b>Children Home</b>		
Run by			NGO, Leprosy Patients Welfare Society		
Year of Establishment of the Home			1978		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			25		
b) Present Strength			30		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
S.No.	Age	Number of Children		Total	

		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	3	15	18	
c)	10-15 years	1	10	11	
d)	15-18 years	-	1	1	
<b>Details of Stay of Children in the home</b>					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	4	10	14	
e)	2-3 years	-	10	10	
f)	3-4 years	-	2	2	
g)	4-5 years	-	3	3	
h)	More than 5 Years	-	1	1	
<b>Number of "Children with special needs" in the home</b>					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Fooding, Lodgings, Dresses, Education, Vocational, health facilities etc.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
<b>Details of Accommodation for Children and Institutional Infrastructure</b>					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	1	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-

g)	Library	1	-	-	-
h)	Counseling & Guidance room	1	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	-	-	-
l)	Separate Latrines for boys and girls	5	-	-	-
m)	Store room	2	-	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	1	-	-	-

Total area of the Campus (Sq. ft.)

½ Acre

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light

Yes

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1	M.A.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	1	M.A.	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	1	M.B.B.S.	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	1	B.A.	-	-
h)	Vocational Instructor	-	1	B.A.	-	-
i)	Store-keeper cum Accountant	-	1	B.A.	-	-
j)	Music Teacher	-	1	B.A.	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	1	8 <sup>th</sup>	-	-
m)	Cook	-	1	8 <sup>th</sup>	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other	-	-	-	-	-
	Total	-	9	-	-	-

### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of

Yes

children in Homes		
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Detail of family history
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	-
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	-
j)	Stock register	$\checkmark$
k)	Any other	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Regular Health Check-up
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		10:00 a.m. to 1:00 p.m.
Frequency of Doctor's visit		Weekly
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	$\checkmark$
b)	Dispensary	-
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS		One
Any specialized services are provided for them		Yes
If yes, Please provide in details		Art
Whether ambulance facility is available for patients		Yes
Any other Facilities		Sick room
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Two
What types of special diet is provided for sick infant or children		As recommended by a State Health Authority
How many cooks are there		One
Whether children are helping at the time of cooking in any way		Yes
Whether any Nutrition and Child Development Officer is there		No
<b>CLOTHING AND BEDDING</b>		

How many sets of clothes, bedding and other articles are given to children							
S. No.	Item			Number	Frequency (Month/Year)		
a)	Summer Clothing			1	Year		
b)	Winter Clothing(Jersey)			1	Year		
c)	School Uniform			2	Year		
d)	Under garments			1	Month		
e)	Towel			2	Year		
f)	Durry			1	Year		
g)	Blanket			1	Year		
h)	Pillow			1	Year		
i)	Shoes/Chappal			2	Year		
j)	Tooth powder/paste			1	Month		
k)	Soap			2	Month		
l)	Oil			1	Month		
m)	Utensils (Plate and Glass)			1	Year		
<b>EDUCATION</b>							
Whether educational facilities are available for children				Yes			
Are any of the educational facilities available within the institution							
a)	Formal School on Premises			Yes	No		
b)	Pre-school			√	-		
c)	Primary			√	-		
d)	Secondary			√	-		
e)	Higher			-	-		
f)	Non-formal classes			-	-		
g)	Private coaching			-	-		
h)	Bridge Course			-	-		
i)	Any other			-	-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	5	5	-	Govt.	½ km	By Walk
b)	Primary	15	13	2	Govt.	1 km	By Walk
c)	Secondary	10	8	2	Govt.	1 km	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			



a)	Cutting and tailoring	-	1	1	6 Month
b)	Beauty Culture	-	2	2	6 Month
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	3	3	6 Month
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	6	-	6	6 Month
n)	Shoes making/leather craft	10	-	10	6 Month
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				ITI Trained	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				Lack of Financial Resource	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Weekly	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				4:00 p.m. to 6:00 p.m. Daily	
What types of books provide for Children				Comics, Folk Tales, Religious Books.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	

b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Social welfare Department, State Health Organisation
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		By Independent Evaluator Team
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		Yearly, by Social Welfare Department Govt. of Manipur
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Child Care Training conducted by Social Welfare Department, Govt. of Manipur.
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Social Welfare Department ★ State Health Organisation
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ General Management and Planning of Children Home

<b>MN/07/ NGO/79</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Ningrin Club	
Address for Communication	L.S. Apong, Children Home, Alung Tang, Ukhrul, Manipur	
Telephone (with STD code)	9436177136	
Fax	Nil	
Email ID	Nil	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	L S Apong	
Vision of NGO	To Provide Motherly Love to Orphans	
Mission of NGO	To run Children Home for Orphans	
Key Objectives	To provide free education	
Major Activities	Feeding and educating the Orphans	
Target group/ Stakeholders	Children	
Geographical location/area	East Dist. Of Manipur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	-	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Societies Registration Act, XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
26 <sup>th</sup> April, 1975	1562/SR/1975	Imphal
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	14	
Physical Assets of the Organization	T.V., Almira, Office Furniture, Computer Benches and Desk	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	44	
Total No. of Professional Staff		
a) Male	7	
b) Female	10	
Total number of		
a) Full Time	11	
b) Part time Staff	6	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		
2009-10	2008-09	2007-08

6,46,101		6,66,521		5,08,300	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	√	-	-	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Children Home		
Contact Details					
a) Name of Superintendent/Secretary			L.S. Apong		
b) Address			Children Home, Alung Tang, Ukhrul, Manipur,		
c) Phone			9436177136		
d) Fax			-		
e) Email			-		
<b>Type of Institution</b>			<b>Children Home (Boys)</b>		
Run by			NGO (Ningrin Club)		
Year of Establishment of the Home			1979		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			50		
b) Present Strength			48		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			Too poor, Divorce etc		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	2	2	
b)	5-10 years	-	28	28	
c)	10-15 years	-	18	18	
d)	15-18 years	-	2	2	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	5	5	
b)	4-6 month	-	8	8	
c)	6-12 month	-	20	20	
d)	1-2 years	-	3	3	
e)	2-3 years	-	4	4	

f)	3-4 years	-	5	5	
g)	4-5 years	-	5	5	
h)	More than 5 Years	-	0	0	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Education, Training Development etc.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Food, Education, Training Development etc.		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
e)	Owned	-			
f)	Rented	√			
g)	Lease	-			
h)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	5	14 * 16	-	-
b)	Classrooms	1	14 * 30	-	-
c)	Sick room/ First Aid Room	1	14 * 14	-	-
d)	Kitchen	2	15 * 15	-	-
e)	Dinning Hall	1	20 * 20	-	-
f)	Recreation room	1	20 * 20	-	-
g)	Library	1	18 * 20	-	-
h)	Counseling & Guidance room	1	20 * 20	-	-
i)	Office rooms	5	12 * 12	-	-
j)	Workshops	1	18 * 20	-	-
k)	Separate Bathrooms for boys and girls	4	5 * 5	-	-
l)	Separate Latrines for boys and girls	4	5 * 5	-	-
m)	Store room	1	14 * 15	-	-
n)	Play Ground	1	300 * 100	-	-
o)	Vocational Training Centre	1	15 * 15	-	-

Total area of the Campus (Sq. ft.)	39104
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	Yes

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1	M.A.	15,000	-
b)	Social Welfare Officer	-	1	M.A.	10,000	-
c)	Counselor	-	1	B.A.	10,000	-
d)	Case Worker	-	1	B.A.	10,000	-
e)	Doctor (Part time or Full time)	-	1	M.B.B.S.	8,000	-
f)	Paramedical Staff	-	1	B. Sc.	5,000	-
g)	Educator	-	1	M. Sc.	4,000	-
h)	Vocational Instructor	-	1	B.A.	4,000	-
i)	Store-keeper cum Accountant	-	1	12 <sup>th</sup>	8,000	-
j)	Music Teacher	-	1	Music Trained	4,000	-
k)	Sports/ Yoga Teacher	-	1	-	4,000	-
l)	Driver	-	1	8 <sup>th</sup>	4,000	-
m)	Cook	-	2	8 <sup>th</sup>	6,000	-
n)	House Aunty	-	2	12 <sup>th</sup>	16,000	-
o)	Security Guard	-	2	10 <sup>th</sup>	8,000	-
p)	Helper	-	2	10 <sup>th</sup>	4,000	-
q)	Sweeper	-	1	10 <sup>th</sup>	2,000	-
r)	Any other	-	-	-	-	-
	Total	-	21	-	1,22,000	-

**CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

**Maintenance of Registers/Record Maintenance**

S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	-
c)	Supervision register	$\checkmark$

d)	Medical file or medical report	√
e)	Nutrition diet file	-
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Yoga
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	Saturday, 7:00 – 9:00 a.m.
Frequency of Doctor's visit	Weekly
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Any specialized services are provided for them	No
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	Horlicks, Oats, O.R.S, Fruits
How many cooks are there	Two
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Year
b)	Winter Clothing(Jersey)	4	Year
c)	School Uniform	2	Year
d)	Under garments	4	Year
e)	Towel	2	Year
f)	Durry	2	Year
g)	Blanket	3	Year
h)	Pillow	3	Year

i)	Shoes/Chappal	2	Year
j)	Tooth powder/paste	3	Month
k)	Soap	3	Month
l)	Oil	2	Month
m)	Utensils (Plate and Glass)	1	Year

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	√
c)	Primary	-	√
d)	Secondary	-	√
e)	Higher	-	√
f)	Non-formal classes	-	√
g)	Private coaching	-	√
h)	Bridge Course	-	√
i)	Any other	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	2	2	-	Govt.	-	By Walk
b)	Primary	28	28	-	Govt.	-	By Walk
c)	Secondary	20	20	-	Govt.	-	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	5	-	5	-
b)	Beauty Culture	-	-	-	-
c)	Computer	2	-	2	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	2	-	2	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-



k)	Soap making	5	-	5	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Weekly	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				9:00 a.m. to 3:00 p.m. Daily	
What types of books provide for Children				Story, Newspaper, Magazines, Comics, Dictionaries etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			No	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	No
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Social Welfare Government of Manipur
<b>DEPARTMENTAL COOPERATION</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		No Response
Suggestion of CWC/Inspection Committee		★ To report the incoming/ outgoing sick students of the Children home
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Guwahati, Management of Children Home

*Mizoram*

<b>MZ/02/ NGO/80</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	The Salvation Army India Eastern Territory	
Address for Communication	Territorial Headquarters Aizawl, Mizoram	
Telephone (with STD code)	0389-2322290	
Fax	0389-2326123	
Email ID	iet_mail@iet.salvationarmy.org	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage and Motherless Babies Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Territorial Commander	
Vision of NGO	Orphan Children Survival	
Mission of NGO	Looking after with love	
Key Objectives	To look after with love and care	
Major Activities	Care and support	
Target group/ Stakeholders	Children	
Geographical location/area	N.E. India	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	-	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
6.12.1995	SR 67/MZ- FRS	Juvenile South Motherless Babies Home
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	Social Welfare Department Mizoram State	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	-	
Physical Assets of the Organization	Own Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	9	
Total No. of Professional Staff		
a) Male	1	
b) Female	8	
Total number of		
a) Full Time	9	
b) Part time Staff	-	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
8,94,804		7,27,640		6,71,800	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
IHQ, London	-	Social Welfare Department	Local Sponsors	Private	Local Church
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Motherless Babies Home	
Contact Details					
a) Name of Superintendent/Secretary				Major Lalnunthara	
b) Address				Tulkual South, Aizawl	
c) Phone				0389-2329868	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Motherless Home</b>	
Run by				NGO (The Salvation Army)	
Year of Establishment of the Home				1938	
Supported by				State Govt. and Salvation Army India Eastern Territory	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				40	
b) Present Strength				40	
Number of Children lodged in the home having families residing in the same State/UT				38	
Reasons for staying in the home in case of children having families (provide details)				Because of the death of their mothers and poverty	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	10	14	24	
b)	5-10 years	6	10	16	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	

b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	3	3	6
e)	2-3 years	4	8	12
f)	3-4 years	2	10	12
g)	4-5 years	7	3	10
h)	More than 5 Years	-	-	-

Number of “Children with special needs” in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

-

Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960

No

Any other registration

-

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board

-

b) Child Welfare Committee

-

If Yes, Please Specify the Facilities provided

-

**INFRASTRUCTURE**

Infrastructure available

a) Owned

√

b) Rented

-

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	1	12 * 24	30	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-

m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	-	10,963/-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	1	1	-	-	-
o)	Security Guard	5	5	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	-	-	--
r)	Any other (Please Specify)	-	-	-	-	-
Total		-	-	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Motherless
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Family History and Background

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please Tick
--------	---------------------	-------------

a)	Admission and discharge register	√
b)	Individual Care Plan	√
c)	Supervision register	-
d)	Medical file or medical report	√
e)	Nutrition diet file	-
f)	Stock Register	-
g)	Visitor's book	√
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other(Please Specify)	

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	Three times in a year
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Any specialized services are provided for them	-
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Two
What types of special diet is provided for sick infant or children	-
How many cooks are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	5	-
b)	Winter Clothing(Jersey)	2	-
c)	School Uniform	2	-
d)	Under garments	-	-
e)	Towel	1	-



f)	Durry	-	-
g)	Blanket	3	-
h)	Pillow	1	-
i)	Shoes/Chappal	2	-
j)	Tooth powder/paste	1	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	1	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	28	16	12	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/	-	-	-	-

	mobile repairing				
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	-		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		Yearly	
f)	Outings	√		Weekly	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms			Yes	

	(at least one bathroom for ten children)	
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Working together for development of Homes
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Child Care Workshop Organised by Social Welfare Department, Govt. of Mizoram
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		<ul style="list-style-type: none"> <li>★ Social Welfare Department</li> <li>★ SSA</li> <li>★ ICDS</li> <li>★ Social Welfare Board, Mizoram</li> </ul>
Suggestion of CWC/Inspection Committee		<ul style="list-style-type: none"> <li>★ CWC suggested reporting to them whether we have child for adoption. Quarterly report is not enough and report as soon as possible</li> </ul>
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>MZ/03/ NGO/81</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Hlimna in Girls Home	
Address for Communication	Saitual Mizoram	
Telephone (with STD code)	09862956420	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	-	
Vision of NGO	-	
Mission of NGO	To grow up maternity	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	11-02-1983	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	S.R. 66.95.MZ-R.F.S	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
-	-	-
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	-	
Physical Assets of the Organization	Own Building and Furniture	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	-	
Total No. of Professional Staff		
a) Male	-	
b) Female	-	
Total number of		
a) Full Time	5	
b) Part time Staff	-	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		
2009-10	2008-09	2007-08

12		10		10	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	√	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Audit Report, Annual Report and Monthly Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Hlimna		
Contact Details					
a) Name of Superintendent/Secretary			Capt. Lalbiaknungi		
b) Address			Saitual 796261, Mizoram		
c) Phone			-		
d) Fax			-		
e) Email			-		
<b>Type of Institution</b>			<b>Children Home</b>		
Run by			NGO (The Salvation Army)		
Year of Establishment of the Home			1983		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			50		
b) Present Strength			50		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	15	-	15	
c)	10-15 years	20	-	20	
d)	15-18 years	15	-	15	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	

g)	4-5 years	15	-	15	
h)	More than 5 Years	35	-	35	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	25	-	25	
b)	Autism	-	-	-	
c)	Physically challenged	25	-	25	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Making Vocational Training Centre in Side Home Building learning computer and tailoring centre		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	60	-	-
b)	Classrooms	2	40	-	-
c)	Sick room/ First Aid Room	1	15	-	-
d)	Kitchen	1	20	-	-
e)	Dinning Hall	1	40	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	15	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	10	10	-	-
l)	Separate Latrines for boys and girls	10	10	-	-
m)	Store room	-	-	-	-
n)	Play Ground	1	40	-	-
o)	Vocational Training Centre	1	15+15	-	-
Total area of the Campus (Sq. ft.)				100	

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	-	-	-	-
q)	Sweeper	1	-	-	-	--
r)	Any other (Please Specify) Mother	1	-	-	-	-
	Total	5	-	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					-	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					-	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register				Please Tick	
a)	Admission and discharge register				√	
b)	Individual Care Plan				√	
c)	Supervision register				√	
d)	Medical file or medical report				√	

e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	-	
j)	Stock register	-	
k)	Any other(Please Specify)		
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		-	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		Milk, Nutrition etc.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	-	-
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	2	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	3	Yearly



j)	Tooth powder/paste	2	Monthly
k)	Soap	2	Monthly
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	8	-	8	Govt.	-	-
b)	Primary	20	-	-	Private	-	-
c)	Secondary	20	-	-	Private	-	-
d)	Higher	2	-	-	Private	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required Sick Children medical bill

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	15	15	6 Months
b)	Beauty Culture	-	-	-	-
c)	Computer	-	5	5	6 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-

k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	-
What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	After Care
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	-
If Yes,	
a) Number of Training Programmes organized	2
b) Details of Training Programmes	ICPS and JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Outside state and learning children in need of care and protection and minimum standard
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Training ★ Playing and Singing
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>MZ/03/ NGO/82</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Hlimna in Girls Home	
Address for Communication	Saitual Mizoram	
Telephone (with STD code)	09862956420	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	-	
Vision of NGO	-	
Mission of NGO	To grow up maternity	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	11-02-1983	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	S.R. 66.95.MZ-R.F.S	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
-	-	-
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	-	
Physical Assets of the Organization	Own Building and Furniture	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	-	
Total No. of Professional Staff		
a) Male	-	
b) Female	-	
Total number of		
a) Full Time	5	
b) Part time Staff	-	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		
2009-10	2008-09	2007-08

12		10		10	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	√	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Audit Report, Annual Report and Monthly Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Hlimna		
Contact Details					
a) Name of Superintendent/Secretary			Capt. Lalbiaknungi		
b) Address			Saitual 796261, Mizoram		
c) Phone			-		
d) Fax			-		
e) Email			-		
<b>Type of Institution</b>			<b>Children Home</b>		
Run by			NGO (The Salvation Army)		
Year of Establishment of the Home			1983		
Supported by			State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			50		
b) Present Strength			50		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	15	-	15	
c)	10-15 years	20	-	20	
d)	15-18 years	15	-	15	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	

g)	4-5 years	15	-	15	
h)	More than 5 Years	35	-	35	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	25	-	25	
b)	Autism	-	-	-	
c)	Physically challenged	25	-	25	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Making Vocational Training Centre in Side Home Building learning computer and tailoring centre		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	60	-	-
b)	Classrooms	2	40	-	-
c)	Sick room/ First Aid Room	1	15	-	-
d)	Kitchen	1	20	-	-
e)	Dinning Hall	1	40	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	15	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	10	10	-	-
l)	Separate Latrines for boys and girls	10	10	-	-
m)	Store room	-	-	-	-
n)	Play Ground	1	40	-	-
o)	Vocational Training Centre	1	15+15	-	-
Total area of the Campus (Sq. ft.)				100	

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/ Year)
a)	Superintendent/ Project Manager	1	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	-	-	-	-
q)	Sweeper	1	-	-	-	--
r)	Any other (Please Specify) Mother	1	-	-	-	-
	Total	5	-	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					-	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					-	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register				Please Tick	
a)	Admission and discharge register				√	
b)	Individual Care Plan				√	
c)	Supervision register				√	
d)	Medical file or medical report				√	

e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	-	
j)	Stock register	-	
k)	Any other(Please Specify)		
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		-	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		Milk, Nutrition etc.	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	2	Yearly
c)	School Uniform	2	Yearly
d)	Under garments	-	-
e)	Towel	2	Yearly
f)	Durry	-	-
g)	Blanket	2	Yearly
h)	Pillow	1	Yearly
i)	Shoes/Chappal	3	Yearly



j)	Tooth powder/paste	2	Monthly
k)	Soap	2	Monthly
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	√	-
c)	Secondary	√	-
d)	Higher	√	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	8	-	8	Govt.	-	-
b)	Primary	20	-	-	Private	-	-
c)	Secondary	20	-	-	Private	-	-
d)	Higher	2	-	-	Private	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required Sick Children medical bill

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	15	15	6 Months
b)	Beauty Culture	-	-	-	-
c)	Computer	-	5	5	6 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-

k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	-
What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	After Care
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	-
If Yes,	
a) Number of Training Programmes organized	2
b) Details of Training Programmes	ICPS and JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Outside state and learning children in need of care and protection and minimum standard
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Training ★ Playing and Singing
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>MZ/05/ NGO/83</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Lairam Motherless Home	
Address for Communication	Collegeveng, Lawngtlai	
Telephone (with STD code)	09436758062	
Fax	03835-232219	
Email ID	likbk@yahoo.com	
Website of Organization	-	
Type of Child Care Institution being run	Motherless Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Rev, H. Lalsangliana 09436148361	
Vision of NGO	-	
Mission of NGO	We will serve the Lord	
Key Objectives	Pleading Gospel through Church, State and Society	
Major Activities	-	
Target group/ Stakeholders	Women and Children	
Geographical location/area	Lawngtlai, Mizoram	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	27.11.1999	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
21-05-2001	SR/MZ-70	Aizwl, Mizoram
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	Yes	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	-	
Physical Assets of the Organization	Own Building, Furniture, Computer, Vehicles etc.	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	100	
Total No. of Professional Staff		
a) Male	36	
b) Female	15	
Total number of		
a) Full Time	100	
b) Part time Staff	-	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
7,70,000		5,00,000		5,13,000	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	-	-	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Audit Report and Annual Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Lairam Motherless Home	
Contact Details					
a) Name of Superintendent/Secretary				Chanchinthahrilthangi	
b) Address				Collegeveng, Lawngtlai	
c) Phone				09436758062	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO (Lairam Jesus Christ Baptist Church)	
Year of Establishment of the Home				1999	
Supported by				Self Support	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				25	
b) Present Strength				19	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	10	9	19	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	

c)	6-12 month	3	4	7	
d)	1-2 years	3	1	4	
e)	2-3 years	4	4	8	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Medical Care from recognized Hospital, Vaccination, Midday meals, Solar Energy Powered		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			None		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	4	12 * 24	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	2	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	2	-	-	-
l)	Separate Latrines for boys and girls	2	-	-	-

m)	Store room	2	-	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	10 <sup>th</sup>	8,000/-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	7	-	-	-	-
o)	Security Guard	1	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	--
r)	Any other (Please Specify)	-	-	-	-	-
Total		10	-	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Motherless Babies
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Family History and background

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please Tick
--------	---------------------	-------------

a)	Admission and discharge register	√
b)	Individual Care Plan	-
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	-
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Vaccination, etc.
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	Monthly
Whether any trained Staff for first-aid	No
Referral of Cases	
a) Govt. Hospital	-
b) Dispensary	-
c) Any other: Hospital Owned by the NGO	√
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	-
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	No
How many times meals are provided in a day	Two
What types of special diet is provided for sick infant or children	Prescribed by Doctor
How many cooks are there	-
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	5	-
b)	Winter Clothing(Jersey)	6	-
c)	School Uniform	-	-
d)	Under garments	8	-
e)	Towel	2	-



f)	Durry	-	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/Chappal	3	-
j)	Tooth powder/paste	1	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	1	-

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

Formal School on Premises		Yes	No
a)	Pre-school	-	√
b)	Primary	-	√
c)	Secondary	-	√
d)	Higher	-	√
e)	Non-formal classes	-	√
f)	Private coaching	-	√
g)	Bridge Course	-	√
h)	Any other	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/	-	-	-	-

	mobile repairing				
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				All Children are below 3 years, we do not need vocational training	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	-		-	
b)	Outdoor games	-		-	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	

g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Donations and Aids
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		-
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		-
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Medical, Child Care
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Social Welfare Department ★ District Council Church Auxiliary for Social Action from Mizoram.
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>MZ/06/ NGO/84</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Audrene Scism Children Home	
Address for Communication	Khuangpuilam, Kolasib- 796081	
Telephone (with STD code)	03837-220543	
Fax	N.A.	
Email ID	<a href="mailto:aschome@rediffmail.com">aschome@rediffmail.com</a>	
Website of Organization	N.A.	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Pastor R. Lalrinmawia	
Vision of NGO	To uplift the Orphan Children	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	Khuangpuilam, Kolasib, Mizoram	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	16.12.1993	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Societies Registration Act, XXI of 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
16.12.1993	SR-217/93/MZ-RFS of 1993	Aizawl, Mizoram
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	N.A.	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	12	
Physical Assets of the Organization	Own Land and Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	9	
Total No. of Professional Staff		
a) Male	4	
b) Female	5	
Total number of		
a) Full Time	9	
b) Part time Staff	-	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		

2009-10		2008-09		2007-08	
16,49,000		9,47,000		9,28,000	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	√	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Audrene Scism Children Home	
Contact Details					
a) Name of Superintendent/Secretary				Pastor R. Lalrinmawia	
b) Address				Khuangpuilam, Kolasib- 796081	
c) Phone				03837-220543	
d) Fax				N.A.	
e) Email				<a href="mailto:aschome@rediffmail.com">aschome@rediffmail.com</a>	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO (United Pasteotal church of North East India)	
Year of Establishment of the Home				1993	
Supported by				UPC-NEP	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				40	
b) Present Strength				39	
Number of Children lodged in the home having families residing in the same State/UT				31	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	3	2	5	
b)	5-10 years	1	11	12	
c)	10-15 years	6	14	20	
d)	15-18 years	1	1	2	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	2	2	4	
b)	4-6 month	-	-	-	
c)	6-12 month	2	1	3	
d)	1-2 years	-	3	3	

e)	2-3 years	-	-	-	
f)	3-4 years	-	4	4	
g)	4-5 years	1	1	2	
h)	More than 5 Years	7	16	23	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Games and Education		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			N.A.		
Whether the Institution is certified as Fit Institution by					
c)	Juvenile Justice Board	-			
d)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	11	432	40	39
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	288	-	-
e)	Dinning Hall	1	576	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	2	216	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	48	-	-
l)	Separate Latrines for boys and girls	16	48	-	-
m)	Store room	1	288	-	-
n)	Play Ground	2	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)	2,81,643
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	Yes

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	-	4,500 /-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	-	4,000 /-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	-	3,500 /-	-
m)	Cook	1	1	-	2,700 /-	-
n)	House Aunty	-	-	-	2,700 /-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	--
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

**Maintenance of Registers/Record Maintenance**

S. No.	Details of Register	Please Tick
a)	Admission and discharge register	√
b)	Individual Care Plan	√
c)	Supervision register	-

d)	Medical file or medical report	√	
e)	Nutrition diet file	-	
f)	Stock Register	-	
g)	Visitor's book	√	
h)	Case file	-	
i)	Inquiry report file	-	
j)	Stock register	-	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Medical Team Visit	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Three times in a Year	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		One Tata Sumo is available	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		No	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		Milk, Eggs etc	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	-
b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	1	-
d)	Under garments	2	-
e)	Towel	1	-
f)	Durry	-	-
g)	Blanket	1	-
h)	Pillow	1	-



i)	Shoes/Chappal	2	-
j)	Tooth powder/paste	1	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	1	-

### EDUCATION

Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			
	Formal School on Premises	Yes	No
a)	Pre-school	-	
b)	Primary	√	
c)	Secondary	√	√
d)	Higher	-	√
e)	Non-formal classes	-	√
f)	Private coaching	-	√
g)	Bridge Course	-	√
h)	Any other	-	-

### How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	1	-	1	Private	7 km	By Bus
e)	Non-formal classes	1	-	1	Govt.	½ km	By Walk
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students		No
If Yes, then how much per child month		-
Whether the educational facilities are adequate for children		Yes
If No, what are the other facilities required		-

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children		No			
If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-

k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	√		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				N.A.	
What types of books provide for Children				N.A.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	No
What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	Social Welfare Board
Whether CWC members visit your institution regularly	No
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
If Yes,	
a) Number of Training Programmes organized	N.A.
b) Details of Training Programmes	N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

*Orissa*

<b>OR/03/ NGO/85</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Basundhara	
Address for Communication	Bidanasi, Cuttack-14 (Orissa)	
Telephone (with STD code)	0675-2503178	
Fax	-	
Email ID	basundhara@satyam.net.in	
Website of Organization	www.basundhara.org	
Type of Child Care Institution being run	Children home, Shelter Home/ Drop-in-Centre and Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Saihia Behera	
Vision of NGO	A Society where every child & women lives in a Secure, Nurturing and just environment which values and upholds their rights holistically	
Mission of NGO	To care for children, women & any human being in disadvantages group to place them in a right place	
Key Objectives	Preservance of Rights of the beneficiaries that the institution work with at all level	
Major Activities	-	
Target group/ Stakeholders	Women, Children and Adolescent	
Geographical location/area	Bidanasi, Cuttack	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	01.11.1985	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
01.11.1985	CTC 4128-329/85/86	Cuttack
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	104860058/29/1/88	
Any other Registration/ Recognition with Central / State Govt.:	RIPA by CARA Recognized by State for V/s-41(4) JJ	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	Certified by State Govt. as Children Home under Section 34(1) of JJ Act by notification No JJ Cell- 28-2004/0293/W&CD 27/04/07	
If No, give reasons thereof	-	
Number of Governing Body Members	5	
Physical Assets of the Organization	-	

<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization					80
Total No. of Professional Staff					
a) Male					30
b) Female					40
Total number of					
a) Full Time					72
b) Part time Staff					8
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
-		-		-	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Own Source
√	√	√	√	√	√
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure, Leaflet, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>					-
Contact Details					
a) Name of Superintendent/Secretary					-
b) Address					-
c) Phone					-
d) Fax					-
e) Email					-
<b>Type of Institution</b>					-
Run by					-
Year of Establishment of the Home					-
Supported by					-
<b>Whether registered under 34(3) of JJ Act with the State Government</b>					<b>Yes</b>
Number of inmates					
a) Capacity					-
b) Present Strength					-
Number of Children lodged in the home having families residing in the same State/UT					-
Reasons for staying in the home in case of children having families (provide details)					-
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	

b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
<b>Details of Stay of Children in the home</b>					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
<b>Number of "Children with special needs" in the home</b>					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by			-		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
<b>Details of Accommodation for Children and Institutional Infrastructure</b>					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	19	20*15	-	-
b)	Classrooms	5	13*12	-	-
c)	Sick room/ First Aid Room	2	18*20	-	-
d)	Kitchen	1	30*19	-	-
e)	Dinning Hall	1	30*20	-	-
f)	Recreation room	2	20*15	-	-
g)	Library	1	20*15	-	-
h)	Counseling & Guidance	2	20*15	-	-

	room				
i)	Office rooms	5	20*15	-	-
j)	Workshops	1	30*20	-	-
k)	Separate Bathrooms for boys and girls	12	6*5	-	-
l)	Separate Latrines for boys and girls	6	6*5	-	-
m)	Store room	1	15*20	-	-
n)	Play Ground	1	80*40	-	-
o)	Vocational Training Centre	1	-	-	-

Total area of the Campus (Sq. ft.) 45000

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	2	-	-	-
b)	Social Welfare Officer	-	1	-	-	-
c)	Counselor	-	1	-	-	-
d)	Case Worker	-	2	-	-	-
e)	Doctor (Part time or Full time)	-	1	-	-	-
f)	Paramedical Staff	-	14	-	-	-
g)	Educator	-	2	-	-	-
h)	Vocational Instructor	-	1	-	-	-
i)	Store-keeper cum Accountant	-	5	-	-	-
j)	Music Teacher	-	1	-	-	-
k)	Sports/ Yoga Teacher	-	1	-	-	-
l)	Driver	-	2	-	-	-
m)	Cook	-	2	-	-	-
n)	House Aunty	-	17	-	-	-
o)	Security Guard	-	3	-	-	-
p)	Helper	-	2	-	-	-
q)	Sweeper	-	2	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention As per norms of JJ Act.

Whether the organization maintains any specific Proforma for Yes



recording details of Information of every child		
If Yes, what kind of information you have collected from children		Entry form, Detail Information about child
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	<input checked="" type="checkbox"/>
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Own N.L.U. with all requisite systems to address immediate lave.
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		10 :00 a.m. to 2:00 p.m. & 3:00 p.m. to 5:00 p.m.
Frequency of Doctor's visit		Yes
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	<input checked="" type="checkbox"/>
b)	Dispensary	<input checked="" type="checkbox"/>
c)	Any other → Private Nursing Home	<input checked="" type="checkbox"/>
How many children are suffering from communicable diseases and HIV/AIDS		Three
Any specialized services are provided for them		Yes
If yes, Please provide in details		CD-4 Test/Medicine/Nutrition/Theraphy
Whether ambulance facility is available for patients		Yes
Any other Facilities		-
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Four
What types of special diet is provided for sick infant or children		As per need & Doctor's Advice
How many cook are there		Two
Whether children are helping at the time of cooking in any way		Yes
Whether any Nutrition and Child Development Officer is there		No
<b>CLOTHING AND BEDDING</b>		

How many sets of clothes, bedding and other articles are given to children							
S. No.	Item			Number	Frequency (Month/Year)		
a)	Summer Clothing			3	Yearly		
b)	Winter Clothing(Jersey)			1	Yearly		
c)	School Uniform			2	Yearly		
d)	Under garments			2	Yearly		
e)	Towel			1	-		
f)	Durry			1	Yearly		
g)	Blanket			1	Yearly		
h)	Pillow			1	Yearly		
i)	Shoes/Chappal			1	Yearly		
j)	Tooth powder/paste			-	-		
k)	Soap			-	-		
l)	Oil			-	-		
m)	Utensils (Plate and Glass)			-	-		
<b>EDUCATION</b>							
Whether educational facilities are available for children				Yes			
Are any of the educational facilities available within the institution							
	Formal School on Premises			Yes	No		
a)	Pre-school			√	-		
b)	Primary			-	-		
c)	Secondary			-	-		
d)	Higher			-	-		
e)	Non-formal classes			-	-		
f)	Private coaching			-	-		
g)	Bridge Course			-	-		
h)	Any other:			-	-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	38	4	34	Govt.	½ km	By Cycle
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						Yes	
If Yes, then how much per child month						As per requirement	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						Resources	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						-	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			

a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		As per necessary	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	√		Yearly	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				10:30 a.m.	
What types of books provide for Children				Story Books/ Comics Cartoons.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	

b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	No
e)	Protection from mosquitoes	No
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		By DSWO, Cuttack/ State Authority
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a)	Number of Training Programmes organized	10
b)	Details of Training Programmes	<ul style="list-style-type: none"> <li>➔ On JJ Act/2000/Rules</li> <li>➔ Capacity Building Workshop on JJ Act/ Rules for all stake holders of JJ System</li> <li>➔ Capacity building/ Training programme for Childline</li> <li>➔ Training on Quality Institutional care &amp; alternatives for Child Care Institutions</li> <li>➔ Training programmes for CWC &amp; JJB &amp; SJPU members in collaboration with State Administration</li> </ul>
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Attended every year different training programme on JJ/Adoption/ Counselling /Health Care Accounting etc by NIPCCD/ Govt. of India (W & CD) State Govt.

<p>Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities</p>	<ul style="list-style-type: none"> <li>➔ Women and Child Development Department, Govt. of Orissa</li> <li>➔ Orissa State Council for Child Welfare</li> <li>➔ CRY/OACRC, Childline, ACA, NGOs/CBOs</li> <li>➔ CWCs/JJBs/Police</li> </ul>
<p>Suggestion of CWC/Inspection Committee</p>	<ul style="list-style-type: none"> <li>➔ Timely Production of CNCP</li> <li>➔ Regular Information to CNC</li> </ul>
<p>Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities</p>	<ul style="list-style-type: none"> <li>➔ On JJ System</li> <li>➔ On ICPS</li> <li>➔ On HIV/AIDS</li> <li>➔ On Women's Issue</li> </ul>

*Rajasthan*

<b>RJ/02/ NGO/86</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Missionaries of Charity	
Address for Communication	Prem Niwas, Kedal Gunj, Alwar, Rajasthan	
Telephone (with STD code)	0144 - 2330909	
Fax	Nil	
Email ID	Nil	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	-	
Vision of NGO	To give whole hearted and free service to the poorest of the poor.	
Mission of NGO	-	
Key Objectives	-	
Major Activities	We take care abandoned physically and mentally handicapped children/sick and dying destitutes	
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	25 <sup>th</sup> May, 1996	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under Societies Registration Act.	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
16-3-1959	S/3509 of 1958-59	Calcutta
Whether the organization is registered under FCRA	-	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	Adoption License Recognition with State Government	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	29199/11-6-09	
If No, give reasons thereof	-	
Number of Governing Body Members	6	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	18	
Total No. of Professional Staff		
a) Male	3	
b) Female	15	
Total number of		
a) Full Time	4	

b) Part time Staff		14		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09		
36,99,110.22		27,72,333.10		
2007-08		23,48,628.10		
Sources of Funding of the NGO (Cash/kind/other)				
International	National	State Govt.	Community Support	
-	-	-	-	
			Donation	
			√	
			Any Other (Please specify)	
			-	
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level			Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			-	
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			Missionaries of Charity	
Contact Details				
a) Name of Superintendent/Secretary			Sr. Roso Lily M.C.	
b) Address			Prem Nivas, Kedal Ganj, Alwar, Rajasthan	
c) Phone			2330909	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home</b>	
Run by			NGO	
Year of Establishment of the Home			1996	
Supported by			-	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			22	
b) Present Strength			12	
Number of Children lodged in the home having families residing in the same State/UT			Nil	
Reasons for staying in the home in case of children having families (provide details)			Nil	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	11	1	12
b)	5-10 years	-	-	-
c)	10-15 years	-	-	-
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	2	1	3



b)	4-6 month	1	-	1	
c)	6-12 month	-	-	-	
d)	1-2 years	1	-	1	
e)	2-3 years	4	-	4	
f)	3-4 years	3	-	3	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
c)	Juvenile Justice Board	√			
d)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	23'' * 10''	22	22
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	10''*15''	-	-
e)	Dinning Hall	1	24''*15''	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	10''*15''	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	3	3.6*6	-	-
l)	Separate Latrines for boys and girls	-	-	-	-

m)	Store room	-	-	-	-
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				2487	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	-	Free Service	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	2	-	-	Free Service	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	-	Free Service	-
f)	Paramedical Staff	2	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	-	-	5,560	-
m)	Cook	1	-	-	2,150	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	1	-	-	-	-
p)	Helper	8	-	-	19,300	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
Total		18	-	-		

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	-
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	-
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick <input type="checkbox"/>
--------	---------------------	--------------------------------------

a)	Admission and discharge register	√
b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify) → Death Register	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	We have origin cylinders succession machine and phototherapy machine when children necessary
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	Full time
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	-
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Any specialized services are provided for them	-
If yes, Please provide in details	-
Whether ambulance facility is available for patients	Yes
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	According to doctor's advice
How many cooks are there	-
Whether children are helping at the time of cooking in any way	-
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	6	Month
b)	Winter Clothing(Jersey)	6	Month
c)	School Uniform	2	Year

d)	Under garments	6	Month
e)	Towel	6	Month
f)	Durry	-	-
g)	Blanket	4	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	2/3	Year
j)	Tooth powder/paste	2	Month
k)	Soap	2	Month
l)	Oil	2	Month
m)	Utensils (Plate and Glass)	1	Year

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	4	-	4	Private	2	Car
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Frequency	
c)	Music	√		Daily	
d)	Television	√		Per Week	
e)	Picnic	-		-	
f)	Outings	√		Monthly	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				-	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets			-	

	(at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	-
h)	Sufficient space for washing	-
i)	Clean and fly-proof kitchen	-
<b>CO-ORDINATION AND COLLABORATION</b>		
	Whether the Organization/Institution is Networking with other Govt., NGOs etc	-
	What types of Co-operation and Co-ordination received for homes	-
<b>MONITORING AND EVALUATION</b>		
	Mechanism used by the Institution to monitor the activities of homes	-
	Whether any specific evaluation of the Organization/Institution has been conducted in the past	-
	If Yes, when and by whom	-
	Whether CWC members visit your institution regularly	No
<b>TRAINING NEEDS</b>		
	Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
	If Yes,	
	a) Number of Training Programmes organized	-
	b) Details of Training Programmes	-
	Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
	If Yes, Please specify	-
	Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
	Suggestion of CWC/Inspection Committee	-
	Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>RJ/03/ NGO/87</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Missionaries of Charity,	
Address for Communication	Mother Teresa Home, Missionaries of Charity, Bhupalpura, Udaipur	
Telephone (with STD code)	0294-2427271	
Fax	Nil	
Email ID	Nil	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sister Superior	
Vision of NGO	To give whole hearted and free service to the poorest of the poor, Irrespective of Cast, Creed and Nationality.	
Mission of NGO	-	
Key Objectives	-	
Major Activities	Free Distribution of Food, Cloth, Medicine to the poor's of the poor, visiting the families, Mobile Clinic to the Rural Areas	
Target group/ Stakeholders	Children	
Geographical location/area	Urban and Rural Areas	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	26 <sup>th</sup> December, 2002	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under Societies Registration Act XXI of 1860.	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
1959	S/3509 of 1958-59	Calcutta
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	Nil	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No: 29178-98, Date: 11-06-2009	
If No, give reasons thereof	-	
Number of Governing Body Members	Copy of the documents of the Governing Body of the Society is attached	
Physical Assets of the Organization	Own building with necessary Furniture	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	12	

Total No. of Professional Staff			
a) Male		2	
b) Female		10	
Total number of			
a) Full Time		4	
b) Part time Staff		1	
<b>FINANCIAL MANAGEMENT</b>			
Annual Budget of Organization for last three years (In Lakhs)			
2009-10		2008-09	2007-08
12,73,385.91		11,52,401.20	10,85,328.20
Sources of Funding of the NGO (Cash/kind/other)			
International	National	State Govt.	Community Support
-	-	-	-
		Donation	Any Other (Please specify)
		Local donation Cash/Kind	-
<b>DOCUMENTATION</b>			
Which of the following documents/communication material are maintained at the organizational level		Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>			
<b>Name of Child Care Institution</b>		Nirmala Sishu Bhawan	
Contact Details			
a) Name of Superintendent/Secretary		Sister Superior mc	
b) Address		Missionaries of Charity Bhupalpura	
c) Phone		0294-2427271	
d) Fax		Nil	
e) Email		Nil	
<b>Type of Institution</b>		<b>Children Home</b>	
Run by		NGO (Missionaries of Charity)	
Year of Establishment of the Home		2002	
Supported by		Self Supported and Local Donation Fund from Head Office Calcutta	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>	
Number of inmates			
a) Capacity		35	
b) Present Strength		20	
Number of Children lodged in the home having families residing in the same State/UT		5	
Reasons for staying in the home in case of children having families (provide details)		Having one parent children, having no source to look after them due to poverty parents are unable to look after them. So we kept them temporarily shelter	
Age breakup of children			
S.No.	Age	Number of Children	
		Girls	Boys
		Total	



a)	0-5 years	1	2	3
b)	5-10 years	4	5	9
c)	10-15 years	7	1	8
d)	15-18 years	-	-	-

Details of Stay of Children in the home

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	3	3
h)	More than 5 Years	2	1	3

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	1	1	2
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home  
Food, Clothing, Education, Medical Sleeping Arrangement Recreational

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960  
Yes

Any other registration  
Nil

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board  
-

b) Child Welfare Committee  
√

If Yes, Please Specify the Facilities provided  
Food, Clothing, Education, Medical Sleeping Arrangement, Recreational Arrangement

**INFRASTRUCTURE**

Infrastructure available

a) Owned  
√

b) Rented  
-

c) Lease  
-

d) Donated  
-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	4	1247.86	35	20
b)	Classrooms	1	253.26	15	10
c)	Sick room/ First Aid Room	1	227.29	3	6
d)	Kitchen	2	648.00	10.28	-
e)	Dinning Hall	1	362.82	35	20

f)	Recreation room	1	906.5	35	30
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	149.04	20	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	1	226.37	10	15
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	1	767.52	20	10
n)	Play Ground	1	-	-	-
o)	Vocational Training Centre	1	788.40	30	20
Total area of the Campus (Sq. ft.)				95285	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	12 <sup>th</sup> Para Medical	Free Service	2009
b)	Social Welfare Officer	0	0	0	0	0
c)	Counselor	0	0	0	0	0
d)	Case Worker	0	0	0	0	0
e)	Doctor (Part time or Full time)	1	1	Pediatric M.D.	Free Service	2006
f)	Paramedical Staff	2	2	12 <sup>th</sup>	Free Service	2010
g)	Educator	1	1	B.Com.	1000	Everyday
h)	Vocational Instructor	0	0	0	0	0
i)	Store-keeper cum Accountant	1	1	12 <sup>th</sup>	Free Service	2010
j)	Music Teacher	0	0	0	0	0
k)	Sports/ Yoga Teacher	0	0	0	0	0
l)	Driver	1	1	8 <sup>th</sup>	6,450	2006
m)	Cook	2	2	10 <sup>th</sup>	7,455	2006/2010
n)	House Aunty	0	0	0	0	0
o)	Security Guard	0	0	0	0	0
p)	Helper	4	4	-	14,910	2006/10
q)	Sweeper	0	0	0	0	0
r)	Any other (Please Specify)	0	0	0	0	0
Total		12	12	-	29815	-

<b>CRITERIA FOR ADMISSION IN SHELTER HOMES</b>		
Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Cara Guideline-2004
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Nil
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	X
c)	Supervision register	X
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	X
j)	Stock register	$\checkmark$
k)	Any other(Please Specify) $\rightarrow$ Death Register	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Visiting Doctor Paramedical Staff Tied up with pediatric Hospital
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		N.A.
Frequency of Doctor's visit		As per need
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	$\checkmark$
b)	Dispensary	-
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS		Nil
Any specialized services are provided for them		No
If yes, Please provide in details		-
Whether ambulance facility is available for patients		Yes
Any other Facilities		Immunization Facility
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Four
What types of special diet is provided for sick infant or children		According to advice of the Pediatrician
How many cooks are there		Two

Whether children are helping at the time of cooking in any way	Nil						
Whether any Nutrition and Child Development Officer is there	Yes						
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	1			As per need		
b)	Winter Clothing(Jersey)	1			As per need		
c)	School Uniform	3			As per need		
d)	Under garments	6			As per need		
e)	Towel	1			As per need		
f)	Durry	1			As per need		
g)	Blanket	1			As per need		
h)	Pillow	1			As per need		
i)	Shoes/Chappal	1			As per need		
j)	Tooth powder/paste	2			As & when Necessary		
k)	Soap	2			As & when Necessary		
l)	Oil	2			As & when Necessary		
m)	Utensils (Plate and Glass)	1			As & when Necessary		
<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
a)	Formal School on Premises	Yes			No		
b)	Pre-school	-			-		
c)	Primary	-			-		
d)	Secondary	-			-		
e)	Higher	-			-		
f)	Non-formal classes	-			-		
g)	Private coaching	-			-		
h)	Bridge Course	-			-		
i)	Any other	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	1	1	-	-	-	Ambule
b)	Primary	15	5	10	-	2 km	Vehicle
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A.	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	

If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Frequency	
b)	Outdoor games	√		Frequency	
c)	Music	√		Daily	
d)	Television	√		Monthly	
e)	Picnic	√		Yearly	
f)	Outings	√		3 times in a year	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				-	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					

S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	√
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	√
c)	Proper drainage System	√
d)	Arrangements for disposal of garbage	√
e)	Protection from mosquitoes	√
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	√
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	√
h)	Sufficient space for washing	√
i)	Clean and fly-proof kitchen	√
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		-
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Early Childhood Programme
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		As per advice yes, if any programme/ workshop concerned children.

<b>RJ/04/ NGO/88</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Bal Sansar Sanstha	
Address for Communication	B-88, Saraswati Marg, Bajaj Nagar, Jaipur-302015, Rajasthan	
Telephone (with STD code)	0141-2709968	
Fax	-	
Email ID	<a href="mailto:bsansarindia@yahoo.co.in">bsansarindia@yahoo.co.in</a>	
Website of Organization	<a href="http://www.balsansarindia.com">www.balsansarindia.com</a>	
Type of Child Care Institution being run	Children Home and Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	Dr. Priyamvada Singh	
Vision of NGO	Empowering the communities to enable them leading a life with dignity, equity and quality	
Mission of NGO	To empower vulnerable community groups enabling them to lead a life with dignity	
Key Objectives	Community Health and Development, Child Rights, Development and Education, Women Development & Gender Issue, Research and Documentation, Capacity Building and Networking	
Major Activities	To focus on Rural Areas and Urban Slums and to address health issues with a focus on women and child health.	
Target group/ Stakeholders	Children	
Geographical location/area	Bal Sansar Sansthan, Foyasagar road, Village Hathi Kheda, District Ajmer, Rajasthan	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	10 <sup>th</sup> January, 1992	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under Societies Registration Act XXI of 1958	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
10 <sup>th</sup> Jan. 1992	346/91-92	Jaipur
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	1976	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	F14(3), Ajmer/09/24969 dated 21/04/2010	

If No, give reasons thereof	-				
Number of Governing Body Members	11				
Physical Assets of the Organization	A Functional Office and three bigger land.				
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization	27				
Total No. of Professional Staff					
a) Male	19				
b) Female	4				
Total number of					
a) Full Time	23				
b) Part time Staff	4				
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10	2008-09	2007-08			
-	23	6			
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
√ FFAIM grant of Rs 35 Lac	√ ILO funding from UNICEF & CSWB	-	√	√	√ Some support in kind
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Sneh Sansar	
Contact Details					
a) Name of Superintendent/Secretary				Mr. Quazi Aashiq and Mr. Raj Kumar	
b) Address				Foy Sagar Road, Ajmer-305001	
c) Phone				0145-2600515/415	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home (Boys)</b>	
Run by				NGO Bal Sansar Sansthan	
Year of Establishment of the Home				2008	
Supported by				Private Donations	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				15	
b) Present Strength				07	
Number of Children lodged in the home having families residing in the same State/UT				7	



Reasons for staying in the home in case of children having families (provide details)			Orphan due to HIV and AIDS			
Age breakup of children						
S.No.	Age	Number of Children		Total		
		Girls	Boys			
a)	0-5 years	-	-	-		
b)	5-10 years	-	-	-		
c)	10-15 years	-	7	7		
d)	15-18 years	-	-	-		
Details of Stay of Children in the home						
S.No.	Duration	Number of Children		Total		
		Girls	Boys			
a)	0-4 month	-	-	-		
b)	4-6 month	-	-	-		
c)	6-12 month	-	1	1		
d)	1-2 years	-	-	-		
e)	2-3 years	-	6	6		
f)	3-4 years	-	-	-		
g)	4-5 years	-	-	-		
h)	More than 5 Years	-	-	-		
Number of "Children with special needs" in the home						
S.No.	Category	Number of Children		Total		
		Girls	Boys			
a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify) HIV affected	-	7	7		
What are the facilities and support services provided for the children staying in Home			Education, Vocational Skills, Food, Clothes, Shelter, Medical Care etc.			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No			
Any other registration			No			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	1	26*20	15	07	

b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	8*10	-	-
d)	Kitchen	1	8*10	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	1	8*10	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	1	10*10	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	2	6*4	-	-
l)	Separate Latrines for boys and girls	2	6*4	-	-
m)	Store room	1	8*10	-	-
n)	Play Ground	1	5000	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				10,000	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/ Year)
a)	Superintendent/ Project Manager	1	1	M.A.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	1	1	8 <sup>th</sup>	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please	-	-	-	-	-

	Specify)					
	Total	2	2	-	-	-
<b>CRITERIA FOR ADMISSION IN SHELTER HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes				Yes		
If Yes Please mention				Orphan due to HIV/AIDS- Lost both parents		
Whether the organization maintains any specific Proforma for recording details of Information of every child				Yes		
If Yes, what kind of information you have collected from children				-		
Maintenance of Registers/Record Maintenance						
S. No.	Details of Register			Please tick $\checkmark$		
a)	Admission and discharge register			$\checkmark$		
b)	Individual Care Plan			$\checkmark$		
c)	Supervision register			$\checkmark$		
d)	Medical file or medical report			$\checkmark$		
e)	Nutrition diet file			$\checkmark$		
f)	Stock Register			$\checkmark$		
g)	Visitor's book			$\checkmark$		
h)	Case file			-		
i)	Inquiry report file			-		
j)	Stock register			$\checkmark$		
k)	Any other(Please Specify) → Death Register			-		
<b>Minimum Standard of Care</b>						
<b>MEDICAL CARE</b>						
What are the health related services available for Children				Regular Health Check-ups		
Does the home have a Medical Care Unit for health check-up of Children				Yes		
If yes, Opening of day, time and duration of MCU				24 Hours, Residential Unit		
Frequency of Doctor's visit				Daily		
Whether any trained Staff for first-aid				Yes		
Referral of Cases						
a)	Govt. Hospital			-		
b)	Dispensary			-		
c)	Any other			-		
How many children are suffering from communicable diseases and HIV/AIDS				7		
Any specialized services are provided for them				Yes		
If yes, Please provide in details				HIV and AIDS Care & Support		
Whether ambulance facility is available for patients				Yes		
Any other Facilities				-		
<b>NUTRITION AND DIET SCALE</b>						
Whether any menu chart followed by homes				Yes		
How many times meals are provided in a day				Three		
What types of special diet is provided for sick infant or				According to advice of the Pediatrician		

children							
How many cooks are there		One					
Whether children are helping at the time of cooking in any way		No					
Whether any Nutrition and Child Development Officer is there		No					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number	Frequency (Month/Year)				
a)	Summer Clothing	2	Yearly				
b)	Winter Clothing(Jersey)	2	Yearly				
c)	School Uniform	1	Yearly				
d)	Under garments	5	Yearly				
e)	Towel	4	Yearly				
f)	Durry	1	Yearly				
g)	Blanket	2	Yearly				
h)	Pillow	2	Yearly				
i)	Shoes/Chappal	5	Yearly				
j)	Tooth powder/paste	5	Yearly				
k)	Soap	18	Yearly				
l)	Oil	18	Yearly				
m)	Utensils (Plate and Glass)	1	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes in Government School					
Are any of the educational facilities available within the institution							
a)	Formal School on Premises	Yes	No				
b)	Pre-school	-	-				
c)	Primary	-	-				
d)	Secondary	-	-				
e)	Higher	-	-				
f)	Non-formal classes	-	-				
g)	Private coaching	-	-				
h)	Bridge Course	-	-				
i)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	7	7	-	Govt.	½ km	Walking
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	

<b>VOCATIONAL TRAINING</b>					
Whether the homes have vocational training facilities for children					Yes
If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	7	-	7	1 Month
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					Yes
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Weekly	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Monthly	
g)	Cultural Programme	-		-	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not					No
If Yes, Opening timing or day					-
What types of books provide for Children					-
<b>SANITATION AND HYGIENE</b>					

Whether Sanitation and Hygiene is maintained in the home through following facilities		
S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	No
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	No
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Internal
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		Vocational Training

<b>RJ/05/ NGO/89</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Roshan Matra Chhayya- Sewa Bharti Samiti, Rajasthan, Jaipur	
Address for Communication	B- 19, Pathey Bhawan, New Colony, Jaipur	
Telephone (with STD code)	0141-2365522	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Shisu Greh	
Whether run by	NGO	
Name and contact of Chief Functionary	Dr. Om Parkash Gupta	
Vision of NGO		
Mission of NGO		
Key Objectives		
Major Activities		
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	-	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
03-01-07	587	Jaipur
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	587, 03-01-07	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	9	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization		
Total No. of Professional Staff		
a) Male	3	
b) Female	-	
Total number of		
a) Full Time	1	

b) Part time Staff		6			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
5,328,871		3003752		2823596	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Brochure, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			-		
Contact Details					
a) Name of Superintendent/Secretary			-		
b) Address			-		
c) Phone			-		
d) Fax			-		
e) Email			-		
<b>Type of Institution</b>			-		
Run by			-		
Year of Establishment of the Home			-		
Supported by			-		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			-		
Number of inmates					
a) Capacity			-		
b) Present Strength			-		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	



c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home		-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960		-			
Any other registration		-			
Whether the Institution is certified as Fit Institution by		-			
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided		-			
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-

n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				-	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	-
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	-
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	-
b)	Individual Care Plan	-

c)	Supervision register	-
d)	Medical file or medical report	-
e)	Nutrition diet file	-
f)	Stock Register	-
g)	Visitor's book	-
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other(Please Specify) → Death Register	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	-
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	-
Referral of Cases	
a) Govt. Hospital	-
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	-
Any specialized services are provided for them	-
If yes, Please provide in details	-
Whether ambulance facility is available for patients	-
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	-
How many times meals are provided in a day	-
What types of special diet is provided for sick infant or children	-
How many cooks are there	-
Whether children are helping at the time of cooking in any way	-
Whether any Nutrition and Child Development Officer is there	-

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Blanket	-	-

h)	Pillow		-		-		
i)	Shoes/Chappal		-		-		
j)	Tooth powder/paste		-		-		
k)	Soap		-		-		
l)	Oil		-		-		
m)	Utensils (Plate and Glass)		-		-		
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes in Government School				
Are any of the educational facilities available within the institution							
	Formal School on Premises		Yes		No		
a)	Pre-school		-		-		
b)	Primary		-		-		
c)	Secondary		-		-		
d)	Higher		-		-		
e)	Non-formal classes		-		-		
f)	Private coaching		-		-		
g)	Bridge Course		-		-		
h)	Any other		-		-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						-	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						-	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				-	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	-	-	-	-
b)	Outdoor games	-	-	-	-
c)	Music	-	-	-	-
d)	Television	-	-	-	-
e)	Picnic	-	-	-	-
f)	Outings	-	-	-	-
g)	Cultural Programme	-	-	-	-
h)	Yoga	-	-	-	-
i)	Debates	-	-	-	-
j)	Radio	-	-	-	-
k)	Any Other	-	-	-	-
<b>LIBRARY</b>					
Whether library facilities are available or not				-	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			-	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			-	
h)	Sufficient space for washing			-	

i)	Clean and fly-proof kitchen	-
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		-
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		-
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		-
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		-
If Yes, Please specify		-
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>RJ/06/ NGO/90</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Bal Shobha Grah	
Address for Communication	Bagar Chowk, 18 E, Chopasni Housing Board, Jodhpur	
Telephone (with STD code)	0291-2542868, 0291-2710222	
Fax	-	
Email ID	<a href="mailto:info@balshobhagrah.org">info@balshobhagrah.org</a>	
Website of Organization	<a href="http://www.balshobhagrah.org">www.balshobhagrah.org</a>	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	P.M. Kumbhat	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	Bagar Chowk Jodhpur, Rajasthan, India	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	August 1987	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registration of Societies Jodhpur, 35/Jodhpur 1987-88	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
August 1987	35/Jodhpur 1987-88	Jodhpur
Whether the organization is registered under FCRA	-	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	-	
If No, give reasons thereof	-	
Number of Governing Body Members	-	
Physical Assets of the Organization	Own building with other facilities	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	15	
Total No. of Professional Staff		
a) Male	10	
b) Female	5	
Total number of		
a) Full Time	10	
b) Part time Staff	5	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
-		-		-	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	√	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Bal Shobha Grah Run by Bal Shobha Sansthan	
Contact Details					
a) Name of Superintendent/Secretary				Madan Nahar	
b) Address				121 Ajeet Colony, Jodhpur 342001	
c) Phone				2510910	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Orphanage</b>	
Run by				NGO (Bal Shobha Sansthan)	
Year of Establishment of the Home				August 1987	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				200	
b) Present Strength				123	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				Orphans	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	



c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home		-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960		Bal Kalyan Samiti Constituted by State Govt.			
Any other registration		N.A.			
Whether the Institution is certified as Fit Institution by		-			
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided		Govt. add as per their norms			
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	2	-	-	-
e)	Dinning Hall	2	-	-	-
f)	Recreation room	2	-	-	-
g)	Library	2	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	2	-	-	-
j)	Workshops	3	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	2	-	-	-

n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				18000	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	3	-	-	-	-
i)	Store-keeper cum Accountant	2 1	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	5	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Detailed Financial Position and Complete Identification
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	-

c)	Supervision register	-
d)	Medical file or medical report	√
e)	Nutrition diet file	-
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Physician, Dentist and Eye Doctor
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	7:00a.m. to 2:00 p.m. 6:00 p.m. to 8:00 p.m.
Frequency of Doctor's visit	Twice in a Year
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	√
c) Any other → Suncity Hospital	√
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Any specialized services are provided for them	N.A.
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	Taxi, Cycle etc

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three
What types of special diet is provided for sick infant or children	As recommended by Doctor
How many cooks are there	Five
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	Year
b)	Winter Clothing(Jersey)	2	Year
c)	School Uniform	2	Year
d)	Under garments	2	2 Year
e)	Towel	1	Year
f)	Durry	1	-

g)	Blanket	2	-
h)	Pillow	1	-
i)	Shoes/Chappal	2	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plate and Glass)	1	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

Formal School on Premises		Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month No

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	20	-	20	1 Year
b)	Beauty Culture	-	-	-	-
c)	Computer	20	-	20	1 Year
d)	Jute bags and 'moti' work	12	-	12	1 Year
e)	Painting and Mehendi	5	-	5	Sunday
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-

i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Weekly	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Twice in a year	
f)	Outings	√		Year	
g)	Cultural Programme	√		Frequency	
h)	Yoga	-		-	
i)	Debates	√		Frequency	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Evening and Morning	
What types of books provide for Children				Newspapers, magazines etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	

h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		N.A.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Members of executive committee visit frequently watch/guide wardons
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		N.A.
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>RJ/07/ NGO/91</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Krishi Gramin Aivum Paryavaran Vikas Sansthan	
Address for Communication	1-C-B, Pawan Puri, Bikaner	
Telephone (with STD code)	0151-2241676, 9928992332	
Fax	-	
Email ID	<a href="mailto:Aredo39@yahoo.co.in">Aredo39@yahoo.co.in</a>	
Website of Organization	-	
Type of Child Care Institution being run	Shishu Greh	
Whether run by	NGO	
Name and contact of Chief Functionary	Vishal Sobti	
Vision of NGO	Social Upliftment of Society	
Mission of NGO	Welfare and Empowerment of the poor and needy	
Key Objectives	Women Empowerment, Child Labour, Agriculture	
Major Activities	Shishu Greh, SHG Formation, Micro-Insurances, Sanitation, Agriculture and DST Activities, Child Labour School.	
Target group/ Stakeholders	Women, Children and Adolescent.	
Geographical location/area	Bikaner District (Rajasthan)	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	10 <sup>th</sup> May, 2001	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
10 <sup>th</sup> May, 2001	39	Bikaner
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	125480015	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	51188, 23 <sup>rd</sup> August, 2008	
If No, give reasons thereof	-	
Number of Governing Body Members	10	
Physical Assets of the Organization	No	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	19	
Total No. of Professional Staff		
a) Male	10	

b) Female					0
Total number of					
a) Full Time					10
b) Part time Staff					9
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
16		10		5	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	√	√	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Shishu Greh	
Contact Details					
a) Name of Superintendent/Secretary				Sh. Vishal Solet	
b) Address				1-C-13, Pawan puri, Bikaner	
c) Phone				9928992332	
d) Fax				-	
e) Email				Ared039@yahoo.co.in	
<b>Type of Institution</b>				<b>Shishu Greh</b>	
Run by				Krishi Grami Avum Paryavaran Vikas Sanstha	
Year of Establishment of the Home				September 2008	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				10	
b) Present Strength				5	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	4	8	12	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					



S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	4	5	9
b)	4-6 month	-	-	-
c)	6-12 month	-	1	1
d)	1-2 years	-	2	2
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

Regular Medical facilities, Recreational Facilities, Sanitation and Hygiene etc

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960

No

Any other registration

No

Whether the Institution is certified as Fit Institution by

-

a) Juvenile Justice Board

-

b) Child Welfare Committee

-

If Yes, Please Specify the Facilities provided

-

**INFRASTRUCTURE**

Infrastructure available

a) Owned

-

b) Rented

√

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	195	20	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	64	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	195	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys	2	21	-	-

	and girls		64		
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	1	300	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				1920	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.Sc.	-	2008
b)	Social Welfare Officer	1	1	B.A.	5500	2008
c)	Counselor	1	1	A.N.M.	5500	2008
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.D.	3000	2008
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	4	4	-	8000	2008
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	-	2000	2008
q)	Sweeper	1	1	-	300	2008
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

#### **CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	On the order of Child Welfare Committee
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	FIR Report, Fitness from Govt. Hospital, Legal free from CWC.

Maintenance of Registers/Record Maintenance			
S. No.	Details of Register		Please tick $\checkmark$
a)	Admission and discharge register		$\checkmark$
b)	Individual Care Plan		$\checkmark$
c)	Supervision register		$\checkmark$
d)	Medical file or medical report		$\checkmark$
e)	Nutrition diet file		$\checkmark$
f)	Stock Register		$\checkmark$
g)	Visitor's book		$\checkmark$
h)	Case file		$\checkmark$
i)	Inquiry report file		$\checkmark$
j)	Stock register		$\checkmark$
k)	Any other(Please Specify)		-
Minimum Standard of Care			
MEDICAL CARE			
What are the health related services available for Children		Proper Vaccination and Regular Health Checkup	
Does the home have a Medical Care Unit for health check-up of Children		-	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Twice in a day	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	$\checkmark$	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
NUTRITION AND DIET SCALE			
Whether any menu chart followed by homes		No	
How many times meals are provided in a day		(0-6 years) Every two hour difference milk	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		-	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		No	
CLOTHING AND BEDDING			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Year

b)	Winter Clothing(Jersey)	2	Year
c)	School Uniform	-	-
d)	Under garments	1	Year
e)	Towel	1	Year
f)	Durry	2	5 Year
g)	Blanket	3	5 Year
h)	Pillow	1	5 Year
i)	Shoes/Chappal	4	-
j)	Tooth powder/paste	2	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	2	-

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

Formal School on Premises		Yes	No
a)	Pre-school	-	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children -

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-

e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	-		-	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	

e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Yearly Inspection from Deputy Director, SJE0, Bikaner
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		★ Micro –Immune by LIC ★ Health Advocacy by PRAYAS ★ Adoption by CARA
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Juvenile Justice Act, 2006 ★ Adoption ★ Child Rights

<b>RJ/09/ NGO/92</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	National Educational Academy Sri Karanpur	
Address for Communication	20/156, Near Ambedkar Park, Sri Karanpur-335073	
Telephone (with STD code)	01501-227099	
Fax	01501-227011	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Darshan Singh	
Vision of NGO	Save Child Rights	
Mission of NGO	Provide shelter to every child	
Key Objectives	Respective Life	
Major Activities	Rehabilitation of Children	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	-	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
30-9-1995	61	Sri Ganganagar
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	JJ Act-34	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	No	
If Yes, give details of registration	F14(2)96/Reg./NEAHanu/CCO/SJD/09/ 59038 Dated-16/10/09	
If No, give reasons thereof	Applied for JJ Act.34(3)	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	13	
Total No. of Professional Staff		
a) Male	7	
b) Female	6	

Total number of					
a) Full Time				12	
b) Part time Staff				1	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
10.368		10.368		10.368	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	√	-	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Composite Centre for Working Children need of Care and Protection	
Contact Details					
a) Name of Superintendent/Secretary				Darshan Singh	
b) Address				-	
c) Phone				9829076889	
d) Fax				-	
e) Email				-	
<b>Type of Institution</b>				<b>Children Home(Both for Boys and Girls)</b>	
Run by				NGO (National Educational Academy, Sri Karanpur)	
Year of Establishment of the Home				-	
Supported by				MWCD	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				100	
b) Present Strength				100	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	22	19	41	
c)	10-15 years	44	15	59	
d)	15-18 years	-	-	-	



Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No		
Any other registration			JJ Act-2008 Cor. Act-2006/34		
Whether the Institution is certified as Fit Institution by			-		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
INFRASTRUCTURE					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	3	900	-	-
c)	Sick room/ First Aid Room	1	300	-	-
d)	Kitchen	1	300	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	1	600	-	-
g)	Library	1	300	-	-
h)	Counseling & Guidance room	1	300	-	-
i)	Office rooms	1	300	-	-
j)	Workshops	2	600	-	-

k)	Separate Bathrooms for boys and girls	3	300	-	-
l)	Separate Latrines for boys and girls	3	300	-	-
m)	Store room	1	300	-	-
n)	Play Ground	1	6000	-	-
o)	Vocational Training Centre	1	600	-	-
Total area of the Campus (Sq. ft.)				10,000	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	1	1	B.Sc.	3500	2007
c)	Counselor	2	2	M.A.(Psycho)	4200	2007
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	2500	2007
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	4	4	B.A.	2800	2007
h)	Vocational Instructor	2	2	ITI	4000	2007
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	2	2	ITI/12 <sup>th</sup>	2800	2007
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify) Educator	1	1	12 <sup>th</sup>	2800	2007
Total		13	13	-	-	-

#### **CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	First Come First Get Basis
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Information about Parents and where from he/she came

Maintenance of Registers/Record Maintenance			
S. No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	$\checkmark$	
c)	Supervision register	$\checkmark$	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	$\checkmark$	
f)	Stock Register	$\checkmark$	
g)	Visitor's book	$\checkmark$	
h)	Case file	$\checkmark$	
i)	Inquiry report file	$\checkmark$	
j)	Stock register	$\checkmark$	
k)	Any other(Please Specify)	-	
Minimum Standard of Care			
MEDICAL CARE			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Once in a week	
Frequency of Doctor's visit		Once in a week	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	-	
c)	Any other $\rightarrow$ Mamta Hospital Hanumangarh	$\checkmark$	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
NUTRITION AND DIET SCALE			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Once	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
CLOTHING AND BEDDING			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-

c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Blanket	-	-
h)	Pillow	-	-
i)	Shoes/Chappal	-	-
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	√	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	√	-
h)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month 100

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	14	23	37	6 Months
b)	Beauty Culture	-	41	41	6 Months
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-

f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Diploma in Electricals, ITI	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Funding for food and rent is very less	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Twice in a week	
d)	Television	-		-	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Daily- 2:00 p.m. to 3:00 p.m.	
What types of books provide for Children				Recreational and knowledge full	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			Yes	

f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	-
h)	Sufficient space for washing	-
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		10
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		<ul style="list-style-type: none"> <li>★ Counseling to children</li> <li>★ For Child Rights</li> <li>★ For Social System prepare for helpless child etc</li> </ul>

<b>RJ/11/ NGO/93</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Bible Chapel Society	
Address for Communication	D-83, Chomu House, C-Scheme Jaipur-302001 (Rajasthan)	
Telephone (with STD code)	0141-2373081	
Fax	-	
Email ID	<a href="mailto:johns@dil.in">johns@dil.in</a>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Rev. Dr. K.C. John	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	Jaipur Rajasthan	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	11 <sup>th</sup> September, 1979	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	1979-80 (Rajasthan Societies Registration Act, 1958)	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
11 <sup>th</sup> Sept. 1979	232/1979-80	Jaipur
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	125560008	
Any other Registration/ Recognition with Central / State Govt.:	No	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	-	
If No, give reasons thereof	-	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	18	
Total No. of Professional Staff		
a) Male	6	
b) Female	92	
Total number of		
a) Full Time	18	
b) Part time Staff	-	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
33.5		32.6		29.5	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
√	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Precious Children Home	
Contact Details					
a) Name of Superintendent/Secretary				Dr. Sam John	
b) Address				D-84, Chomu House, JPR-I (Rajasthan)	
c) Phone				98290-19712	
d) Fax				-	
e) Email				Johns@dil.in	
<b>Type of Institution</b>				<b>Children Home (Boys and Girls)</b>	
Run by				NGO (Bible Chapel Society)	
Year of Establishment of the Home				2000-01	
Supported by				-	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				60	
b) Present Strength				52	
Number of Children lodged in the home having families residing in the same State/UT				52	
Reasons for staying in the home in case of children having families (provide details)				Poverty	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	8	9	17	
c)	10-15 years	12	15	27	
d)	15-18 years	2	6	8	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	



d)	1-2 years	-	1	1	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	51	51	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
e)	Mentally challenged	-	-	-	
f)	Autism	-	-	-	
g)	Physically challenged	-	-	-	
h)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Balanced diet, Medical Facilities, Entertainment Opportunities (T.V., DVD etc), Sports of games for development, Computer Education, Frequent visits by renowned personalities, School on campus.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No		
Any other registration			No		
Whether the Institution is certified as Fit Institution by			-		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	1710	-	-
b)	Classrooms	12	528	-	-
c)	Sick room/ First Aid Room	1	300	-	-
d)	Kitchen	1	200	-	-
e)	Dinning Hall	1	1710	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	5 6	-	-	-

l)	Separate Latrines for boys and girls	5 6	-	-	-	-
m)	Store room	1	-	-	-	-
n)	Play Ground	1	-	-	-	-
o)	Vocational Training Centre	-	-	-	-	-
Total area of the Campus (Sq. ft.)					.38 Hectares	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Ph.D.	-	1995
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	1	Ph.D.	-	2005
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	1	M.D.	-	2010
f)	Paramedical Staff	-	1	B. Sc. Nursing	-	2010
g)	Educator	-	1	Graduate	-	2010
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	1	Graduate	-	2000
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	1	Graduate	-	2010
l)	Driver	-	1	-	5000	2005
m)	Cook	-	1	-	3000	-
n)	House Aunty	-	1	-	4000	-
o)	Security Guard	-	2	-	3000	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	1	-	2500	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	1	-	-	-	-
<b>CRITERIA FOR ADMISSION IN SHELTER HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Children of the Prisoners or Children who are victims of Crime	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					-	
Maintenance of Registers/Record Maintenance						

S. No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	-	
c)	Supervision register	-	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	-	
f)	Stock Register	$\checkmark$	
g)	Visitor's book	$\checkmark$	
h)	Case file	-	
i)	Inquiry report file	-	
j)	Stock register	$\checkmark$	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Twice Weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		Vehicle on Campus	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		As recommended by the Doctors	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		Yes	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	Year
b)	Winter Clothing(Jersey)	2	Year
c)	School Uniform	3	Year

d)	Under garments	2	Half Yearly
e)	Towel	1	Half Yearly
f)	Durry	1	Year
g)	Blanket	1	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	2/1	Year
j)	Tooth powder/paste	-	-
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	√	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other: Computer Course	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	3	2	1	-	500 mts	Walk
c)	Secondary	2	-	2	-	500 mts	Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-

Whether instructors are trained Yes

If Yes, details of qualification -

Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course No

Difficulty (if any) -

### RECREATIONAL FACILITIES

Whether recreational facilities are available Yes

If yes, what are the recreation facilities available for children in Institution

S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	√	Daily
c)	Music	√	Daily
d)	Television	√	Daily
e)	Picnic	√	Yearly
f)	Outings	√	Weekly
g)	Cultural Programme	√	Monthly
h)	Yoga	-	-
i)	Debates	-	-
j)	Radio	-	-
k)	Any Other	-	-

### LIBRARY

Whether library facilities are available or not No

If Yes, Opening timing or day -

What types of books provide for Children -

### SANITATION AND HYGIENE

Whether Sanitation and Hygiene is maintained in the home through following facilities

S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets	Yes

	(at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>RJ/12/ NGO/94</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Taabar	
Address for Communication	Bal Basera C/O Ranbasera Behind, Sadar Police Thana, Station Road, Jaipur (Rajasthan) - 302006	
Telephone (with STD code)	0141-2207158	
Fax	Nil	
Email ID	<a href="mailto:Paliwal.ramesh@gmail.com">Paliwal.ramesh@gmail.com</a>	
Website of Organization	<a href="http://www.taabar.org">www.taabar.org</a>	
Type of Child Care Institution being run	Shelter Home/ Drop-in-Centre	
Whether run by	NGO	
Name and contact of Chief Functionary	Ramesh Paliwal 09829850566	
Vision of NGO	To create awareness & build a free Caring, fair Society with access to opportunity for all	
Mission of NGO	To provide & extend caring, sharing and protecting environment and overall well being of the children, who cannot speak and advocate for their rights	
Key Objectives	To provide care and protection to the street children and to preserve & protect their childhood and rights	
Major Activities	Psycho- Socio Counseling, Nutritional Support, Counseling & Treatment of STIs, HIV/AIDS Education, Regular follow-up, Networking and liaison	
Target group/ Stakeholders	Adolescent and Children	
Geographical location/area	Jaipur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	30 <sup>th</sup> November, 2007	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
30 <sup>th</sup> November, 2007	591	Jaipur
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	123560223	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	

If Yes, give details of registration		Renewal Rate :26-07-2012			
If No, give reasons thereof		-			
Number of Governing Body Members		11			
Physical Assets of the Organization		-			
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization		20			
Total No. of Professional Staff					
a) Male		17			
b) Female		3			
Total number of					
a) Full Time		-			
b) Part time Staff		-			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
2200000		2100000		1,56,374	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
√	-	√	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Audit Report and Newsletter		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			Yes		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			-		
Contact Details					
a) Name of Superintendent/Secretary			-		
b) Address			-		
c) Phone			-		
d) Fax			-		
e) Email			-		
<b>Type of Institution</b>			-		
Run by			-		
Year of Establishment of the Home			-		
Supported by			-		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			-		
Number of inmates					
a) Capacity			-		
b) Present Strength			-		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					



S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by			-		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-

f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	-
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				-	-

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of	-
---	---

children in Homes		
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		-
If Yes, what kind of information you have collected from children		-
<b>Maintenance of Registers/Record Maintenance</b>		
S.No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	-
b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	-
e)	Nutrition diet file	-
f)	Stock Register	-
g)	Visitor's book	-
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other(Please Specify)	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		-
Does the home have a Medical Care Unit for health check-up of Children		-
If yes, Opening of day, time and duration of MCU		-
Frequency of Doctor's visit		-
Whether any trained Staff for first-aid		-
<b>Referral of Cases</b>		
a)	Govt. Hospital	-
b)	Dispensary	-
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS		-
Any specialized services are provided for them		-
If yes, Please provide in details		-
Whether ambulance facility is available for patients		-
Any other Facilities		-
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		-
How many times meals are provided in a day		-
What types of special diet is provided for sick infant or children		-
How many cooks are there		-
Whether children are helping at the time of cooking in any way		-
Whether any Nutrition and Child Development Officer is there		-
<b>CLOTHING AND BEDDING</b>		
How many sets of clothes, bedding and other articles are given to children		

S. No.	Item	Number	Frequency (Month/Year)				
a)	Summer Clothing						
b)	Winter Clothing(Jersey)						
c)	School Uniform						
d)	Under garments						
e)	Towel						
f)	Durry						
g)	Blanket						
h)	Pillow						
i)	Shoes/Chappal						
j)	Tooth powder/paste	-	-				
k)	Soap	-	-				
l)	Oil	-	-				
m)	Utensils (Plate and Glass)	-	-				
<b>EDUCATION</b>							
Whether educational facilities are available for children		-					
Are any of the educational facilities available within the institution							
	Formal School on Premises	Yes	No				
a)	Pre-school	-	-				
b)	Primary	-	-				
c)	Secondary	-	-				
d)	Higher	-	-				
e)	Non-formal classes	-	-				
f)	Private coaching	-	-				
g)	Bridge Course	-	-				
h)	Any other: Computer Course	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary						
c)	Secondary						
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						-	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						-	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						-	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		

b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games				
b)	Outdoor games				
c)	Music				
d)	Television				
e)	Picnic				
f)	Outings				
g)	Cultural Programme				
h)	Yoga		-		-
i)	Debates		-		-
j)	Radio		-		-
k)	Any Other		-		-
<b>LIBRARY</b>					
Whether library facilities are available or not				-	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			-	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			-	

c)	Proper drainage System	-
d)	Arrangements for disposal of garbage	-
e)	Protection from mosquitoes	-
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	-
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	-
h)	Sufficient space for washing	-
i)	Clean and fly-proof kitchen	-
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		-
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		-
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		-
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		-
If Yes, Please specify		-
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

*Tamil Nadu*

<b>TN/01/GO/95</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>St. Gosephs Home for Children</b>	
Contact Details				
a) Name of Superintendent/Secretary			Rev. Sr. Panimaya Rani	
b) Address			<b>Service Convent Thoothukudi</b>	
c) Phone			0461-2331031/ 2331030	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Government	
Year of Establishment of the Home			23.04.1924	
Supported by			State Government and our Registered Society	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			360	
b) Present Strength			325	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	11	-	11
c)	10-15 years	209	-	209
d)	15-18 years	105	-	105
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	325	-	325
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	



a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Providing Sufficient water for all the inmates, well furnished kitchen, living rooms, office section, sanitation facilities, medical facilities, playground, library, study hall etc.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			Running the children Home giving residential facilities, Education- Medical Care, Supervision Study and Prayers life with the help of our Congregation and State Government		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-

m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 16940

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	B.A. B. Ed.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	-	M.A. B. Ed.	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	1	-	Sec. Grade	1,000	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	3	-	9 <sup>th</sup>	6,000	-
n)	House Aunty	3	-	Sec. Grade	6,000	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	-	S.S.L.C.	1,000	-
q)	Sweeper	1	-	5 <sup>th</sup>	700	-
r)	Any other	-	-	-	-	-
	Total	11	-		14,700	

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention Orphan, Semi Orphan, Economically Poor

Whether the organization maintains any specific Proforma for recording details of Information of every child Yes

If Yes, what kind of information you have collected from children About Family Background

**Maintenance of Registers/Record Maintenance**

S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
--------	---------------------	---

a)	Admission and discharge register	√	
b)	Individual Care Plan	√	
c)	Supervision register	√	
d)	Medical file or medical report	√	
e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Once in a two months	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	√	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		According to their diseases, we are providing.	
How many cooks are there		Three	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-

f)	Durry		-	-			
g)	Blanket		-	-			
h)	Pillow		-	-			
i)	Shoes/ Chappal		-	-			
j)	Tooth powder/paste		-	-			
k)	Soap		-	-			
l)	Oil		-	-			
m)	Utensils (Plate and Glass)		-	-			
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes				
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	-			
b)	Primary		√	-			
c)	Secondary		√	-			
d)	Higher		√	-			
e)	Non-formal classes		-	-			
f)	Private coaching		-	-			
g)	Bridge Course		-	-			
h)	Any other		-	-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	√	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	√	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				12 <sup>th</sup> , T.T.C.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		Daily	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	√		-	
j)	Radio	√		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				5:30 to 6:30 p.m.	
What types of books provide for Children				Leaders Bibliography, Short Moral Stories, Newspaper etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			No	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			No	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets			Yes	

	(at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
	Whether the Organization/Institution is Networking with other Govt., NGOs etc	No
	What type of Co-operation and Co-ordination has been received for homes	-
<b>MONITORING AND EVALUATION</b>		
	Mechanism used by the Institution to monitor the activities of homes	-
	Whether any specific evaluation of the Organization/Institution has been conducted in the past	-
	If Yes, when and by whom	-
	Whether CWC members visit your institution regularly	-
<b>TRAINING NEEDS</b>		
	Whether the Institution has organized any training programme regarding JJ Act for its Staff	-
	If Yes,	
	a) Number of Training Programmes organized	-
	b) Details of Training Programmes	-
	Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
	If Yes, Please specify	-
	Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
	Suggestion of CWC/Inspection Committee	-
	Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>TN/02/GO/96</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>St. Micheal Home for Children</b>	
Contact Details				
a) Name of Superintendent/Secretary			Sr. Adelaide	
b) Address			<b>Kammangudipatty, Sammanasur, oonayur post</b>	
c) Phone			04333/274944	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Both Boys and Girls)</b>	
Run by			-	
Year of Establishment of the Home			01.02.1980	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			25	
b) Present Strength			25	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	10	9	19
c)	10-15 years	3	3	6
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	13	12	25

Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	2573	25	25
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	25	-	-
d)	Kitchen	1	212	-	-
e)	Dinning Hall	1	321	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	-	-	-	-
i)	Office rooms	-	1000	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	4	164	-	-
l)	Separate Latrines for boys and girls	4	100	-	-
m)	Store room	1	209	-	-
n)	Play Ground	1	5675	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				10279	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					



S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	12 <sup>th</sup>	3,500	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	10 <sup>th</sup>	2,500	-
q)	Sweeper	-	-	-	-	-
r)	Any other	-	-	-	-	-
	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		-
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input type="checkbox"/>

i)	Inquiry report file	-	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		-	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		-	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		-	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		-	
Whether any Nutrition and Child Development Officer is there		-	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	1	Year
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Blanket	-	-
h)	Pillow	1	Year
i)	Shoes/ Chappal	-	-
j)	Tooth powder/paste	1	Monthly
k)	Soap	1	Monthly
l)	Oil	1	Monthly
m)	Utensils (Plate and Glass)	-	-

<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises				Yes	No	
a)	Pre-school				-	-	
b)	Primary				√	-	
c)	Secondary				-	-	
d)	Higher				-	-	
e)	Non-formal classes				-	-	
f)	Private coaching				-	-	
g)	Bridge Course				-	-	
h)	Any other				-	-	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						-	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						-	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		

n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Weekly	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				4:30 to 5:00 p.m.	
What types of books provide for Children				Short Moral Stories etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			-	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			-	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			-	
h)	Sufficient space for washing			-	
i)	Clean and fly-proof kitchen			-	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				-	
What type of Co-operation and Co-ordination has been received for				-	

homes	
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	-
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	-
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	-
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	-
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>TN/01/ NGO/97</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Florence Nightingale Trust	
Address for Communication	351/1, Bharthi Nagar, Palar Anaicut Road, Walajapet- 6	
Telephone (with STD code)	04172-231212	
Fax	-	
Email ID	Florence_nightingale2512005@yahoo.com, fntrust@gmail.com	
Website of Organization	-	
Type of Child Care Institution being run	Orphanage	
Whether run by	NGO	
Name and contact of Chief Functionary	P. Murugesan, Founder/Managing Trustee	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	Environmental Sanitation, Health Education	
Major Activities	Run Orphanage Home	
Target group/ Stakeholders	-	
Geographical location/area	Walaja(T.K.), Vannivedu (Vill.), Bharathi Nagar, Palar Anaicut Road, Vellore, Tamilnadu	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	05-04-2005	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Indian Trust Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
05-04-2005	129/2005 Trust	Walaja, Sub Register Office
06-07-2005	251/2005 NGO	District Social Welfare, Vellore
Whether the organization is registered under FCRA	Applied	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	42062/CW-2/2009, Dated: 30-07-2010	
If No, give reasons thereof	-	
Number of Governing Body Members	7	
Physical Assets of the Organization	Rented Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	6	

Total No. of Professional Staff		6		
a) Male		3		
b) Female		3		
Total number of		6		
a) Full Time		6		
b) Part time Staff		-		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09		2007-08
-		4,29,416		4,12,905
Sources of Funding of the NGO (Cash/kind/other)				
International	National	State Govt.	Community Support	Donation
-	-	-	√	√
Any Other (Please specify)				
-				
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level				Audit Report
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>				Florence Nightingale, Orphanage Home For Children
Contact Details				
a) Name of Superintendent/Secretary				G. Karunakaran
b) Address				351/1, Palar anaicut road, Walajapet
c) Phone				09994207206
d) Fax				-
e) Email				<a href="mailto:florence_nightingale2512005@yahoo.com">florence_nightingale2512005@yahoo.com</a>
<b>Type of Institution</b>				<b>Children Home (Both Boys and Girls)</b>
Run by				NGO (Florence Nightingale NGO)
Year of Establishment of the Home				23-06-2008
Supported by				Public Donations
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>
Number of inmates				
a) Capacity				50
b) Present Strength				35
Number of Children lodged in the home having families residing in the same State/UT				35
Reasons for staying in the home in case of children having families (provide details)				Below Poverty Line, Not Enough Education Facilities
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	1	1	2
b)	5-10 years	10	12	22

c)	10-15 years	3	7	10	
d)	15-18 years	1	-	1	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	15	20	35	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	1	1	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Shelter, Education & Weekly Medical Checkup etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			Yes		
Any other registration			Trust Registration, NGO Registration, Child Care JJ Act Registration		
Whether the Institution is certified as Fit Institution by			(Applied)		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	-	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	-	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance	-	-	-	-



	room				
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 4,284.00

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention Parents Death Certificate, Ration Card

Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Family Ration Card, Address for Communication
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	-
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Everyday Maintain Yoga & Meditation Exercise
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		-
Frequency of Doctor's visit		Yes
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	<input checked="" type="checkbox"/>
b)	Dispensary	-
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS		None
Any specialized services are provided for them		No
If yes, Please provide in details		-
Whether ambulance facility is available for patients		No
Any other Facilities		-
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Three
What types of special diet is provided for sick infant or children		Milk, Bread etc
How many cooks are there		One
Whether children are helping at the time of cooking in any way		No
Whether any Nutrition and Child Development Officer is there		-
<b>CLOTHING AND BEDDING</b>		
How many sets of clothes, bedding and other articles are given to children		

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Year
b)	Winter Clothing(Jersey)	2	Year
c)	School Uniform	2	Year
d)	Under garments	2	Year
e)	Towel	2	Year
f)	Durry	2	Year
g)	Blanket	2	Year
h)	Pillow	2	Year
i)	Shoes/Chappal	2	Year
j)	Tooth powder/paste	2	Year
k)	Soap	2	Year
l)	Oil	2	Year
m)	Utensils (Plate and Glass)	2	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

		Yes	No
a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	√	-
d)	Secondary	-	-
e)	Higher	√	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	15	7	8	-	-	-
c)	Secondary	6	3	3	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	14	10	4	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month 15

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-

b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Yes, Struggling	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Every Sunday	
What types of books provide for Children				History of Leaders, Story Books etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	

c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		No
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>TN/02/ NGO/98</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Thedal Trust	
Address for Communication	3, Saraswati Nagar, thiruninravur (R.S.), Thiruvallur, Pin Code: 602024, Tamilnadu	
Telephone (with STD code)	044-26344226	
Fax	-	
Email ID	<a href="mailto:Thedaltrust13@yahoo.in">Thedaltrust13@yahoo.in</a>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	I. Philomina 09444209592	
Vision of NGO	To promote eatable world (Equality of Men and Women)	
Mission of NGO	To work for all round development downtrodden people in the society	
Key Objectives	To work for improvement of Women and to promote reproductive child health care	
Major Activities	To run Children Home for poor children and to run tailoring centre for poor women	
Target group/ Stakeholders	Women and Children	
Geographical location/area	Thiruninravur Village and surroundings in Thiruvallur District, Tamil Nadu	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	10-10-2003	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Indian Trust Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
10-10-2003	1128/03	Avadi/ Chennai
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	076020063	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	43/DSW/2010, Dated: 01-07-2010, Chennai-05	
If No, give reasons thereof	-	

Number of Governing Body Members		5			
Physical Assets of the Organization		Rented Building			
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization		5			
Total No. of Professional Staff		6			
a) Male		3			
b) Female		3			
Total number of					
a) Full Time		4			
b) Part time Staff		2			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
7,84,071		3,95,509		3,75,468	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Children Home, Thedal Trust	
Contact Details					
Name of Superintendent/Secretary				I.Philomina	
Address				3, Saraswathi Nagar, Tiruninravur, Tiruvallur: 602024, TamilNadu	
Phone				044-26344226	
Fax				-	
Email				Thedaltrust13@yahoo.in	
<b>Type of Institution</b>				<b>Children Home (Both Boys and Girls)</b>	
Run by				NGO (Thedal Trust)	
Year of Establishment of the Home				2003	
Supported by				Public Donations	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
Capacity				30	
Present Strength				25	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				Poor Children	
Age breakup of children					
S.No.	Age	Number of Children		Total	

		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	5	4	9
c)	10-15 years	2	4	6
d)	15-18 years	6	4	10

**Details of Stay of Children in the home**

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	2	1	3
e)	2-3 years	3	0	3
f)	3-4 years	1	5	6
g)	4-5 years	6	5	11
h)	More than 5 Years	1	1	2

**Number of "Children with special needs" in the home**

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

-

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960

No

Any other registration

-

Whether the Institution is certified as Fit Institution by

-

a) Juvenile Justice Board

-

b) Child Welfare Committee

-

If Yes, Please Specify the Facilities provided

-

**INFRASTRUCTURE**

Infrastructure available

a) Owned

-

b) Rented

√

c) Lease

-

d) Donated

-

**Details of Accommodation for Children and Institutional Infrastructure**

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	480	15	13
b)	Classrooms	2	288	15	13
c)	Sick room/ First Aid Room	1	288	8	10
d)	Kitchen	1	360	30	25
e)	Dinning Hall	1	396	30	25
f)	Recreation room	1	520	30	25



g)	Library	1	120	20	25
h)	Counseling & Guidance room	1	288	30	25
i)	Office rooms	1	120	5	3
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	5	160	30	25
l)	Separate Latrines for boys and girls	5	160	30	25
m)	Store room	2	288	30	25
n)	Play Ground	1	1673	30	25
o)	Vocational Training Centre	1	520	30	25

Total area of the Campus (Sq. ft.) 3347

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.S.W.	2,000 (Hono.)	2007
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.S.W.	2,000 (Hono.)	2007
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.D.	2,000 (Hono.)	2007
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	1	1	B. Com.	-	2007
h)	Vocational Instructor	1	1	Diploma	2,000 (Hono.)	2007
i)	Store-keeper cum Accountant	1	1	B. Com.	2,000 (Hono.)	2007
j)	Music Teacher	1	1	M.A.	-	2007
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	S.S.L.C.	5,000	2007
m)	Cook	2	2	-	4,000	2007
n)	House Aunty	1	1	-	2,500	2007
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	12 <sup>th</sup>	1,500	2007
q)	Sweeper	2	2	-	2,000	2007
r)	Any other (Please Specify)	-	-	-	-	-
	Total	14	14	-	-	-

### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes	
If Yes Please mention	Economically Poor & Backward	
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes	
If Yes, what kind of information you have collected from children	Child's Particulars and family details	
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	-
c)	Supervision register	-
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	-
f)	Stock Register	-
g)	Visitor's book	$\checkmark$
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	$\checkmark$
k)	Any other(Please Specify)	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children	Hospital- Doctors Visit	
Does the home have a Medical Care Unit for health check-up of Children	No	
If yes, Opening of day, time and duration of MCU	-	
Frequency of Doctor's visit	-	
Whether any trained Staff for first-aid	No	
<b>Referral of Cases</b>		
a)	Govt. Hospital	-
b)	Dispensary	-
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	None	
Any specialized services are provided for them	Yes	
If yes, Please provide in details	Visit from Health Centre	
Whether ambulance facility is available for patients	No	
Any other Facilities	-	
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes	Yes	
How many times meals are provided in a day	Four	
What types of special diet is provided for sick infant or children	According to the need of the children instructed by the Doctor	
How many cooks are there	Two	
Whether children are helping at the time of cooking in any way	-	
Whether any Nutrition and Child Development Officer is there	No	
<b>CLOTHING AND BEDDING</b>		

How many sets of clothes, bedding and other articles are given to children							
S. No.	Item			Number	Frequency (Month/Year)		
a)	Summer Clothing			1	Year		
b)	Winter Clothing(Jersey)			1	Year		
c)	School Uniform			2	Year		
d)	Under garments			1	Year		
e)	Towel			1	Year		
f)	Durry			1	Year		
g)	Blanket			1	Year		
h)	Pillow			1	Year		
i)	Shoes/Chappal			1	Year		
j)	Tooth powder/paste			1	Month		
k)	Soap			1	Month		
l)	Oil			1	Month		
m)	Utensils (Plate and Glass)			1	Year		
<b>EDUCATION</b>							
Whether educational facilities are available for children				Yes			
Are any of the educational facilities available within the institution							
a)	Formal School on Premises			Yes	No		
b)	Pre-school			-	-		
c)	Primary			-	-		
d)	Secondary			-	-		
e)	Higher			-	-		
f)	Non-formal classes			-	-		
g)	Private coaching			√	-		
h)	Bridge Course			-	-		
i)	Any other: Computer Course			-	-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	8	3	5	-	1½ km	Jeep
c)	Secondary	11	7	4	-	1½ km	Jeep
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other Tailoring	2	-	2	Private	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade		Number of Children			Duration of Course	

		Boys	Girls	Total	
a)	Cutting and tailoring	-	15	15	1 Year
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Diploma in Tailoring	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Monthly	
g)	Cultural Programme	√		Occasionally	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	√		Weekly	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				9:00 a.m. to 5:00 p.m.	
What types of books provide for Children				Stories & Literature Books etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	

b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Project Guidance
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Animators & field Officers
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Project Officers
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		-
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Ayurvedic Medical Programme- Chennai
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		Two admit only one group either Boys or Girls.
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		Counseling, Health Hygiene, Women Development etc.

<b>TN/03/ NGO/99</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Eternal Peace Mission	
Address for Communication	84, D. Aladi Street, Cheranmahadevi-627414, Tirunelveli dist. Tamilnadu	
Telephone (with STD code)	04634-260967	
Fax	09486926213	
Email ID	<a href="mailto:eternalpeacemision@gmail.com">eternalpeacemision@gmail.com</a>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	C. Johnson	
Vision of NGO	Uplift the life of Poor	
Mission of NGO	Peace	
Key Objectives	Service to poor	
Major Activities	Uplift in Education	
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	16-05-2005	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Indian Trust Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
17-05-2005	199/205	Tirunelveli
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	No	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No: 30/DSW/2010 5953/CW-2/2010, Dt. 05-08-2010	
If No, give reasons thereof	-	
Number of Governing Body Members	4	
Physical Assets of the Organization	Own and Rented Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	4	
Total No. of Professional Staff		
a) Male	-	
b) Female	1	
Total number of		
a) Full Time	3	

b) Part time Staff		2		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09		
3.24		5.28		
2007-08		1.42		
Sources of Funding of the NGO (Cash/kind/other)				
International	National	State Govt.	Community Support	
-	-	-	-	
			Donation	
			√	
			Any Other (Please specify)	
			-	
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level			Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			Immanuel Home for Children	
Contact Details				
a)Name of Superintendent/Secretary			C. Johnson	
b)Address			84. D, Aladi Street, Cheranmahadevi-627414	
c)Phone			(04634) 260967, 09486926213	
d)Fax			-	
e)Email			eternalpeacemission@gmail.com	
<b>Type of Institution</b>			<b>Children Home (Both Boys and Girls)</b>	
Run by			NGO	
Year of Establishment of the Home			2008	
Supported by			Public Fund	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a)Capacity			25	
b)Present Strength			22	
Number of Children lodged in the home having families residing in the same State/UT			22	
Reasons for staying in the home in case of children having families (provide details)			Motherless/Fatherless and broken Families	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	6	3	9
c)	10-15 years	3	5	8
d)	15-18 years	2	3	5
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	1	-	1

b)	4-6 month	-	-	-	
c)	6-12 month	-	1	1	
d)	1-2 years	2	-	2	
e)	2-3 years	8	10	18	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by			-		
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	√			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	334(G) 390(B)	11	11
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	1	100	-	-
d)	Kitchen	1	136	-	-
e)	Dinning Hall	-	213(G) 120(B)	120	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	1	180	-	-
i)	Office rooms	1	144	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	3	25,25,129 25,30,25	-	-



l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	1	103	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				6100	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	S.S.L.C.	Honorarium	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	Up to S.S.L.C.	Honorarium	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	B. A.	Honorarium	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	7 <sup>th</sup>	1,000	-
n)	House Aunty	1	1	9 <sup>th</sup>	Honorarium	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
s)	Total	5	5	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Broken Families
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Family Position Report
Maintenance of Registers/Record Maintenance	

S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	-
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	-
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	$\checkmark$
j)	Stock register	$\checkmark$
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Local Government Hospital
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	$\checkmark$
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	-
Any specialized services are provided for them	-
If yes, Please provide in details	-
Whether ambulance facility is available for patients	-
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	According to the need of the children instructed by the Doctor
How many cook are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	2	Year
d)	Under garments	-	Year

e)	Towel	1	Year
f)	Durry	-	Year
g)	Blanket	1	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	1	Year
j)	Tooth powder/paste	1	Month
k)	Soap	1	Month
l)	Oil	1	Month
m)	Utensils (Plate and Glass)	1	Year

### EDUCATION

Whether educational facilities are available for children No

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	9	3	6	Govt.	¼ km	-
c)	Secondary	10	7	3	Govt.	¼ km	-
d)	Higher	2	-	2	Govt.	¼ km	-
e)	Non-formal classes	1	1	-	Private	¼ km	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-

h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	-		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	-		-	
g)	Cultural Programme	√		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Everyday Evening	
What types of books provide for Children				Biography of National Leaders, General Knowledge and Stories.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	

g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		1
b) Details of Training Programmes		The Governing Body meets often for Home
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		To follow all the instruction of CWC Do good to Children
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		Tirunelveli Dist.

<b>TN/04/ NGO/100</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Shalom Foundation	
Address for Communication	No. 24, 10 <sup>th</sup> East Main Road, Gandhi Nagar, Vellore-632006, Tamil Nadu	
Telephone (with STD code)	0416-2248156	
Fax	-	
Email ID	<a href="mailto:vlr_vshalom@sancharnet.in">vlr_vshalom@sancharnet.in</a>	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	M.Jayapaul, Director	
Vision of NGO	Needy Children and youth are helped to come up in life and became useful citizens	
Mission of NGO	To provide quality care and education to the needy children and youth with the help of service minded	
Key Objectives	Provide Opportunity to have holistic development	
Major Activities	Providing good Shelter, food, education, loving care, recreational activities and counseling services.	
Target group/ Stakeholders	Children	
Geographical location/area	Gandhi Nagar, vellore-632006, Tamil Nadu	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	21.11.1991	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
21.11.1991	188	Katpadi, Vellore
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	075980195	
Any other Registration/ Recognition with Central / State Govt.:	Registered under Income Tax Act U/S, 12A(a), Regd.No.31/1992	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	S.No: 48/DSW/2010	
If No, give reasons thereof	-	
Number of Governing Body Members	6	
Physical Assets of the Organization	Own Building, Adequate furniture are provided	
<b>MANPOWER OF ORGANIZATION</b>		

Total manpower of your Organization		4		
Total No. of Professional Staff				
a) Male		3		
b) Female		1		
Total number of				
a) Full Time		3		
b) Part time Staff		1		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09	2007-08	
3,30,000		3,25,000	2,75,000	
Sources of Funding of the NGO (Cash/kind/other)				
International	National	State Govt.	Community Support	
√	√	-	-	
Donation		Any Other (Please specify)		
√		-		
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level		Annual Report and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		Shalom Home for Children		
Contact Details				
a) Name of Superintendent/Secretary		M. Jayapaul, Director		
b) Address		No. 24, 10 <sup>th</sup> East Main Road, Gandhi Nagar, Vellore-632006, Tamil Nadu		
c) Phone		0416-2248156		
d) Fax		-		
e) Email		vlr_vshalom@sancharnet.in		
<b>Type of Institution</b>		<b>Children Home (Boys)</b>		
Run by		NGO (Shalom Foundation)		
Year of Establishment of the Home		1993		
Supported by		Shalom Foundation which receives donations from individuals and families		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		20		
b) Present Strength		20		
Number of Children lodged in the home having families residing in the same State/UT		20		
Reasons for staying in the home in case of children having families (provide details)		Extreme poverty and family problems		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-

b)	5-10 years	-	-	-	
c)	10-15 years	-	17	17	
d)	15-18 years	-	3	3	
<b>Details of Stay of Children in the home</b>					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	
d)	1-2 years	-	1	1	
e)	2-3 years	-	7	7	
f)	3-4 years	-	7	7	
g)	4-5 years	-	5	5	
h)	More than 5 Years	-	-	-	
<b>Number of "Children with special needs" in the home</b>					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by			-		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
<b>Details of Accommodation for Children and Institutional Infrastructure</b>					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	336,192,192	-	-
b)	Classrooms	1	672	-	-
c)	Sick room/ First Aid Room	1	144	-	-
d)	Kitchen	1	180	-	-
e)	Dinning Hall	1	413	-	-
f)	Recreation room	1	144	-	-
g)	Library	1	165	-	-
h)	Counseling & Guidance	1	256	-	-



	room				
i)	Office rooms	2	288	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	5	225	-	-
l)	Separate Latrines for boys and girls	6	225	-	-
m)	Store room	1	180	-	-
n)	Play Ground	1	2500	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 6960

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A.	8,400	June 93
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	B. Com.	8,188	Nov. 99
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	3,500	June 2001
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	B.A.	6,000	June 2000
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	4	4	-	26,088	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention Orphans, Widow's Child, Widower's Child and the poorest

		among the poor
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		-
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	-
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	-
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	-
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify) Attendance Register Academic performance Register	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		-
Does the home have a Medical Care Unit for health check-up of Children		No
If yes, Opening of day, time and duration of MCU		-
Frequency of Doctor's visit		Once in a month
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	-
b)	Dispensary	-
c)	Any other Christian Medical College Hospital, Vellore SIHRC hospital, Karigiri	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
How many children are suffering from communicable diseases and HIV/AIDS		No
Any specialized services are provided for them		N.A.
If yes, Please provide in details		-
Whether ambulance facility is available for patients		N.A.
Any other Facilities		-
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Three
What types of special diet is provided for sick infant or children		According to the need of the children instructed by the Doctor
How many cook are there		One
Whether children are helping at the time of cooking in any way		No

Whether any Nutrition and Child Development Officer is there		Yes					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	1			Year		
b)	Winter Clothing(Jersey)	-			-		
c)	School Uniform	2			Year		
d)	Under garments	4			Year		
e)	Towel	1			Year		
f)	Durry	-			-		
g)	Blanket	1			Year		
h)	Pillow	-			-		
i)	Shoes/Chappal	2			Year		
j)	Tooth powder/paste	1			Month		
k)	Soap	1			Month		
l)	Oil	100 ml			Month		
m)	Utensils (Plate and Glass)	2			Year		
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
	Formal School on Premises	Yes			No		
a)	Pre-school	-			-		
b)	Primary	-			-		
c)	Secondary	-			-		
d)	Higher	-			-		
e)	Non-formal classes	-			-		
f)	Private coaching	-			-		
g)	Bridge Course	-			-		
h)	Any other: Computer Course	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	1	1	-	Private	300 ft	Walking
c)	Secondary	19	19	-	Private	300 ft	Walking
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Year	
f)	Outings	√		Twice in a Year	
g)	Cultural Programme	√		Weekly	
h)	Yoga	-		-	
i)	Debates	√		Special Occasions	
j)	Radio	-		-	
k)	Any Other: Children's Camps and Games Competitions	√		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Holidays and Week Ends	
What types of books provide for Children				Biographies and Moral Books, General Knowledge and Stories.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					

S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		E.Q. Training, Leadership Training and Child Care Worker Training
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		JJ Act Trends in Child Welfare Counselling

<b>TN/06/ NGO/101</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Tribal Rural Urban Service Trust (TRUST)	
Address for Communication	'Wonderland', 470- Korattiyam Kotta, 1 <sup>st</sup> Street, Ayyampalayam Puthur, Ayyampalayam, Tiruvannamalai- 606603	
Telephone (with STD code)	09443214574	
Fax	Nil	
Email ID	trustthecosmos@rediffmail.com	
Website of Organization	Nil	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Mr. C.S. Gireesan Nampoothiri 470-Korattiyam Kotta, 1 <sup>st</sup> Street, Ayyampalayam Puthur, Ayyampalayam, Tiruvannamalai- 606603	
Vision of NGO	Emergence of a world full of Love, Peace & Harmony by "living together & growing together"	
Mission of NGO	To imbibe in people the spirit and motivation to live together understanding the importance and need for peace coexistence in spite of differences	
Key Objectives	To serve the development needs of people under the poverty line and especially of children who had become parentless.	
Major Activities	To organize a eco-friendly task force of children from all the age-groups and equip them will knowledge and skills to take proper care of their immediate environment	
Target group/ Stakeholders	Children	
Geographical location/area	Tiruvannamalai, Chengum & Kalasapakkam Blocks of Tiruvannamalai district in Tamilnadu	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	22.01.1993	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registered under Trust Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
22.01.1993	07/1993	Tiruvannamalai

Whether the organization is registered under FCRA	Yes				
If Yes, FCRA No,	076030139				
Any other Registration/ Recognition with Central / State Govt.:	Registered u/s 12AA of IT Act, 1961 as a Public Charitable Trust DIT (E), No.(987)/2002-2003 Registration under Income Tax: PAN: AAAAT4647D				
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes				
If Yes, give details of registration	S. No: 33/DSW/2010: Procd. No. 39316/CW-2/2009 Dt. 23.07.2010				
If No, give reasons thereof	-				
Number of Governing Body Members	3				
Physical Assets of the Organization	Own building and furniture				
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization	17				
Total No. of Professional Staff					
a) Male	2				
b) Female	2				
Total number of					
a) Full Time	11				
b) Part time Staff	6				
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10	2008-09	2007-08			
43,03,800.00	29,86,814.00	33,46,088.00			
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Rental Income, Bank Interest
√	-	-	-	√	√
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Wonder Home	
Contact Details					
a) Name of Superintendent/Secretary				Mr. Giresan Nampoothiri	
b) Address				'Wonderland', 470- Korattiyan Kotta, 1 <sup>st</sup> Street, Ayyampalayam Puthur, Ayyampalayam, Tiruvannamalai- 606603	

c) Phone		09443214574		
d) Fax		Nil		
e) Email		trustthecosmos@rediffmail.com		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		NGO (TRUST)		
Year of Establishment of the Home		14.11.2007		
Supported by		St. Eco-Trust, The Netherlands & Local donations		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		36		
b) Present Strength		11		
Number of Children lodged in the home having families residing in the same State/UT		11		
Reasons for staying in the home in case of children having families (provide details)		Single parents or their families have financial constraints and live under difficulties		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	1	1
c)	10-15 years	-	10	10
d)	15-18 years	-	-	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	11	11
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-
What are the facilities and support services provided for the children staying in Home		N.A.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960		No		



Any other registration		Nil				
Whether the Institution is certified as Fit Institution by		-				
	Juvenile Justice Board	√				
	Child Welfare Committee	-				
If Yes, Please Specify the Facilities provided		Nutritious food, Comfortable shelter, Medical Benefits, Sports & Games, Entertainment, Vocational Skills, help in academic performance etc				
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	2	651+324	36	11	
b)	Classrooms	1	512	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	192	-	-	
e)	Dinning Hall	-	192	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	1	168	-	-	
h)	Counseling & Guidance room	-	-	-	-	
i)	Office rooms	1	120	-	-	
j)	Workshops	1	366	-	-	
k)	Separate Bathrooms for boys and girls	4	240	-	-	
l)	Separate Latrines for boys and girls	5	220	-	-	
m)	Store room	1	121	-	-	
n)	Play Ground	-	30,520	-	-	
o)	Vocational Training Centre	1	651	-	-	
p)	Meditation Hall	1	768	-	-	
Total area of the Campus (Sq. ft.)				4.10 Acres		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	8,000	Oct.2008

b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	500 per visit	June 2010
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	1	1	TTC	2,000	May 2008
i)	Store-keeper cum Accountant	1	1	DCA + Tally	3,500	June 2010
j)	Music Teacher	-	1	-	2,000	April 2010
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	9 <sup>th</sup>	3,750	April 2009
n)	House Aunty	1	1	MA	4,000	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)					
	Night Care Taker	1	1	SSLC	5,000	Nov. 2007
	Tuition Teacher	1	1	BA, B.Ed.	4,000	Nov. 2010
s)	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Orphans, Semi-Orphans, Under Poverty Line
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Name, Address, Contact Details, Family Details, Income, Expenditure and Living Conditions etc

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	$\checkmark$
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other(Please Specify)	-

#### Minimum Standard of Care

<b>MEDICAL CARE</b>			
What are the health related services available for Children		Nutritious food, Health Education, Personal Hygiene, Periodical Health Check-up, Dental Check-up etc	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		N.A.	
Frequency of Doctor's visit		Twice a year	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	√	
c)	Any other Visits of Clinics of Specialized Medical Doctors depending on the need	√	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		No	
If yes, Please provide in details		N.A.	
Whether ambulance facility is available for patients		No	
Any other Facilities		Transportation arranged from outside	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		As per doctor's advice	
How many cook are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	4	Year
d)	Under garments	4	Once in 6 Months
e)	Towel	2	Once in 6 Months
f)	Durry	-	-
g)	Blanket	1	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	1+1	Once in 6 Months
j)	Tooth powder/paste	2	Monthly
k)	Soap	2	Monthly
l)	Oil	200 ml	Monthly
m)	Utensils (Plate and Glass)	1+2	Replaced as and when required

<b>EDUCATION</b>							
Whether educational facilities are available for children						Yes	
Are any of the educational facilities available within the institution							
Formal School on Premises		Yes		No			
a)	Pre-school	-		√			
b)	Primary	-		√			
c)	Secondary	-		√			
d)	Higher	-		-			
e)	Non-formal classes	√					
f)	Private coaching	√					
g)	Bridge Course	-		-			
h)	Any other: Vocational training	√		-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	1	1	-	Govt.	1 km	By Walk
c)	Secondary	10	10	-	Govt.	1 km	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A.	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						N.A.	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	4	-	4	During Vacations		
b)	Beauty Culture	-	-	-	-		
c)	Computer	11	-	11	All Week Ends		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	2	-	2	Special Camps during Vacations		
n)	Shoes making/leather craft	-	-	-	-		

o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Each of them have Skill Training Certificates in their respective trades	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Nil	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Weekly	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Weekly	
e)	Picnic	√		Yearly	
f)	Outings	√		Half Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	√		Yearly	
j)	Radio	-		-	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				6:30 am to 07:00 am and 6:30 pm to 07:30 pm, All Days	
What types of books provide for Children				Autobiographies, Story Books, Puzzles, Moral Stories, History, Geography etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					
Whether the Organization/Institution is Networking with other Govt., NGOs etc				No	

What types of Co-operation and Co-ordination received for homes	N.A.
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	Review meetings with staffs, review of registers and records, periodical meetings of the trust board and consultations with the parents.
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	N.A.
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
If Yes,	
a) Number of Training Programmes organized	N.A.
b) Details of Training Programmes	N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Organised by Terre des Homes & Department of Social Welfare
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	Child care and environment

<b>TN/07/ NGO/102</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Little Angel Children's Home	
Address for Communication	No 8/16 East Main Road, Mukuperi, Thoothukudi, Dt: 628616	
Telephone (with STD code)	Mobile No: 09360026989	
Fax	-	
Email ID	<a href="mailto:vision_trust@hotmail.com">vision_trust@hotmail.com</a>	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Mr. R. Stephen Joseph	
Vision of NGO	Upliftment of Orphan	
Mission of NGO	Destitutes to downtrodden people	
Key Objectives	Destitutes to downtrodden people	
Major Activities	Destitutes to downtrodden people	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	2001	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Registration under section 34(3) of Juvenile Act 2000 as amended in 2006	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
31.03.2010	15/DSW/2010	Chepauk, Chennai, 600005
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	076160027	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	S. No: 15/DSW/2010 From 01.04.2010	
If No, give reasons thereof	-	
Number of Governing Body Members	16	
Physical Assets of the Organization	Rent free building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	8	
Total No. of Professional Staff		
a) Male	1	
b) Female	7	
Total number of		
a) Full Time	5	
b) Part time Staff	3	
<b>FINANCIAL MANAGEMENT</b>		
Annual Budget of Organization for last three years (In Lakhs)		

2009-10		2008-09		2007-08	
6,42,529		5,02,713		3,68,356.55	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Little Angel Children's Home	
Contact Details					
Name of Superintendent/Secretary				Mr. R. Stephen Joseph	
Address				No 8/16 East Main Road, Mukuperi, Thoothukudi, Dt: 628616	
Phone				Mobile No: 09360026989	
Fax				-	
Email				<a href="mailto:vision_trust@hotmail.com">vision_trust@hotmail.com</a>	
<b>Type of Institution</b>				<b>Children Home (Both Boys and Girls)</b>	
Run by				NGO	
Year of Establishment of the Home				2001	
Supported by				MWCD and Donations collected from well-wishers	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
Capacity				100	
Present Strength				51	
Number of Children lodged in the home having families residing in the same State/UT				51	
Reasons for staying in the home in case of children having families (provide details)				Destitute and Orphans , Below Poverty Line Children	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	2	1	3	
b)	5-10 years	9	4	16	
c)	10-15 years	14	14	28	
d)	15-18 years	4	-	4	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	-	-	



d)	1-2 years	-	-	-	
e)	2-3 years	1	-	1	
f)	3-4 years	-	-	-	
g)	4-5 years	1	1	2	
h)	More than 5 Years	26	22	48	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Provide free Boarding and lodging, Free Stationary		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No		
Any other registration			Registered with the State Govt. under section 34(3) of Juvenile Justice Act 2000 as amended in 2006		
Whether the Institution is certified as Fit Institution by			Child Welfare Committee		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Education, Library and Lab, Recreation & Sports, Medical Facilities, Drinking Water, Sanitation facilities, Food, Clothing and Bedding		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	-			
c)	Lease	-			
d)	Donated	√			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	-	1500	-	-
b)	Classrooms	-	-	-	-
c)	Sick room/ First Aid Room	-	750	-	-
d)	Kitchen	3	250	-	-
e)	Dinning Hall	6	802	-	-
f)	Recreation room	2	370	-	-
g)	Library	-	500	-	-
h)	Counseling & Guidance room	-	120	-	-
i)	Office rooms	1	92	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for	5	130	-	-

	boys and girls				
l)	Separate Latrines for boys and girls	6	140	-	-
m)	Store room	3	260	-	-
n)	Play Ground	-	8000	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				12914	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A.	Honorarium	-
b)	Social Welfare Officer	1	1	-	2500	-
c)	Counselor	1	1	-	Honorarium	-
d)	Case Worker	5	1	-	Honorarium	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	Honorarium	-
f)	Paramedical Staff	1	1	ANM	Honorarium	-
g)	Educator	5	3	Graduate	500/-	-
h)	Vocational Instructor	1	1	B.C.A	-	-
i)	Store-keeper cum Accountant	1	1	Graduate	-	-
j)	Music Teacher	1	1	Organist	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	3	2	8 <sup>th</sup>	1500/-	-
n)	House Aunty	2	2	-	Honorarium	-
o)	Security Guard	-	-	-	-	-
p)	Helper	5	1	10 <sup>th</sup>	1,000 /-	-
q)	Sweeper	1	1	-	1,000 /-	-
r)	Any other (Please Specify)	-	-	-	-	-
s)	Total	-	-	-	-	-

### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Orphans, Destitute and Children of jailed parents
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

Maintenance of Registers/Record Maintenance			
S. No.	Details of Register		Please tick $\checkmark$
a)	Admission and discharge register		$\checkmark$
b)	Individual Care Plan		$\checkmark$
c)	Supervision register		-
d)	Medical file or medical report		$\checkmark$
e)	Nutrition diet file		$\checkmark$
f)	Stock Register		$\checkmark$
g)	Visitor's book		$\checkmark$
h)	Case file		$\checkmark$
i)	Inquiry report file		$\checkmark$
j)	Stock register		$\checkmark$
k)	Any other(Please Specify)		-
Minimum Standard of Care			
MEDICAL CARE			
What are the health related services available for Children		Primary Health Centre at Mukuperi	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Weekly Once Saturday Morning or Evening	
Frequency of Doctor's visit		Once in a week	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	$\checkmark$	
b)	Dispensary	-	
c)	Any other St. Lukes Hospital, Nazareth	$\checkmark$	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		No	
NUTRITION AND DIET SCALE			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		Bread, Fruits, Rice Kanjee are provided as per the perception of the doctor.	
How many cook are there		Two	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
CLOTHING AND BEDDING			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	Year

b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	2	Year
d)	Under garments	2	Year
e)	Towel	2	Year
f)	Durry	-	-
g)	Blanket	1	Year
h)	Pillow	-	Year
i)	Shoes/Chappal	1	Year
j)	Tooth powder/paste	50 gm	Month
k)	Soap	500 gm	Month
l)	Oil	100 gm	Month
m)	Utensils (Plate and Glass)	1	Every 2 Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	-
c)	Primary	√	-
d)	Secondary	√	-
e)	Higher	√	-
f)	Non-formal classes	-	-
g)	Private coaching	√	-
h)	Bridge Course	-	-
i)	Any other: Polytechnic	√	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	1	-	1	Private	1 km	By Walk
b)	Primary	18	8	10	Private	1 km	By Walk
c)	Secondary	28	14	14	Private	1 km	By Walk
d)	Higher	3	-	3	Private	1 km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month 50/-

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	15	15	2 Years
b)	Beauty Culture	-	-	-	-
c)	Computer	6	9	15	2 Years
d)	Jute bags and 'moti' work	-	-	-	-

e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				T.T.C. in Tailoring, B.E. in Computer Science	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Finance inadequate	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Weekly	
g)	Cultural Programme	√		Monthly	
h)	Yoga	-		-	
i)	Debates	√		Monthly	
j)	Radio	√		Daily	
k)	Any Other:	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Every Evening, 5:00 to 9:00 p.m.	
What types of books provide for Children				General Knowledge and Moral Books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	

e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		The Chairman gives useful advices to the Staff men, If any defect or downfall is noted, it is rectified.
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		05.11.2009, By the department of Social Welfare
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes, a) Number of Training Programmes organized		1
b) Details of Training Programmes		Child Development and Care and Protection Organized by the Social Defence Department
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		Should maintain register for: → Attendance → Stock → Daily Menu → Medical → Games
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

*Tripura*

<b>TR/01/GO/103</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>State Orphanage for Boys, Ramnagar</b>	
Contact Details				
a) Name of Superintendent/Secretary			Sri Tapan Dhar	
b) Address			State Orphanage for Boys, Ramnagar, P.O. Janata College, N. Tripura	
c) Phone			-	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home and After Care Home</b>	
Run by			State Government (Social Welfare & Social Education)	
Year of Establishment of the Home			1965	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			55	
b) Present Strength			53	
Number of Children lodged in the home having families residing in the same State/UT			Nil	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	2	2
c)	10-15 years	-	16	16
d)	15-18 years	-	8	8
e)	Above	-	27	27
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	13	13
e)	2-3 years	-	4	4
f)	3-4 years	-	3	3
g)	4-5 years	-	2	2



h)	More than 5 Years	-	31	31	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Lodging, Education & Medical Facilities		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			No		
Whether the Institution is certified as Fit Institution by			Yes		
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Food, Lodging, Education & Medical Facilities		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	4000	55	53
b)	Classrooms	1	160	25	24
c)	Sick room/ First Aid Room	0	-	-	-
d)	Kitchen	1	160	-	-
e)	Dinning Hall	1	200	30	-
f)	Recreation room	1	200	40	-
g)	Library	1	160	25	-
h)	Counselling & Guidance room	0	-	-	-
i)	Office rooms	1	200	-	-
j)	Workshops	0	-	-	-
k)	Separate Bathrooms for boys and girls	0	-	-	-
l)	Separate Latrines for boys and girls	4	20	4	-
m)	Store room	1	144	-	-
n)	Play Ground	1	25000	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				9.67	
Whether the dormitories, classrooms and workshops have sufficient				Yes	

ventilation and Light						
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B. Com.	20,700	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	1	-	-	-	-
g)	Educator	2	1	B.A.	20,000	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	12 <sup>th</sup>	15,000	-
j)	Music Teacher	1	1	12 <sup>th</sup>	2,400	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	1	12 <sup>th</sup>	12,000	-
n)	House Aunty	1	1	12 <sup>th</sup>	11,000	-
o)	Security Guard	2	1	12 <sup>th</sup>	12,000	-
p)	Helper	2	1	12 <sup>th</sup>	13,000	-
q)	Sweeper	2	1	12 <sup>th</sup>	12,000	-
r)	Any other :	-	-	-	-	-
	<b>Total</b>	<b>15</b>	<b>9</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Children must be parentless and financially disabled and age must be between (6-8) yrs	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					Birth Certificate, Medical Fitness and Death Certificate of Parents	
<b>Maintenance of Registers/Record Maintenance</b>						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register				<input checked="" type="checkbox"/>	
b)	Individual Care Plan				<input checked="" type="checkbox"/>	
c)	Supervision register				<input checked="" type="checkbox"/>	

d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Medical Cheque up by M.P.W.
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	N.A.
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	No
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	Nil
Any specialized services are provided for such children	-
If yes, Please provide in details	-
Whether ambulance facility is available for patients	-
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Two
What types of special diet is provided for sick infant or children	Bread and Milk
How many cooks are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	Yes

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	1	Yearly
d)	Under garments	2	Yearly
e)	Towel	2	Yearly
f)	Durry	0	Yearly
g)	Blanket	1	Yearly
h)	Pillow	1	Yearly

i)	Shoes/ Chappal		2	Yearly			
j)	Tooth powder/paste		50 gm	Monthly			
k)	Soap		500 gm	Monthly			
l)	Oil		150 gm	Monthly			
m)	Utensils (Plate and Glass)		-	-			
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes				
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	-			
b)	Primary		√	-			
c)	Secondary		√	-			
d)	Higher		-	-			
e)	Non-formal classes		-	-			
f)	Private coaching		-	-			
g)	Bridge Course		-	-			
h)	Any other		-	-			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	8	8	-	Govt.	200 m	By Foot
c)	Secondary	16	16	-	Govt.	200 m	By Foot
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A.	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				-	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	√		Monthly	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				1:00 to 7:00 p.m.	
What types of books provide for Children				Magazine, Quiz, G.K., Story, Science Magazine, Newspaper	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			No	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		-
What type of Co-operation and Co-ordination has been received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Educational and behavioral performance of the inmates
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Monthly, by the Superintendent of that Home
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		Yes
If Yes,		
a) Number of Training Programmes organized		1
b) Details of Training Programmes		Yoga Training was organized by the department at Agartala around 3 years ago
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes, by Department
If Yes, Please specify		Yoga Training
<b>DEPARTMENTAL COOPERATION</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		No Response
Suggestion of CWC/Inspection Committee		If any problem arise CWC solve the problems
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		No Response

*Uttar Pradesh*

<b>UP/01/GO/104</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		<b>Rajkiya Bal Greh (Boys)</b>		
Contact Details				
a) Name of Superintendent/Secretary		Mr. D.D. Ram Verma		
b) Address		Suraj Kund Road, Merath		
c) Phone		0121-2656453		
d) Fax		-		
e) Email		-		
<b>Type of Institution</b>		<b>Children Home and Observation Home</b>		
Run by		State Government		
Year of Establishment of the Home		1961		
Supported by		State Government		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		100		
b) Present Strength		34		
Number of Children lodged in the home having families residing in the same State/UT		34		
Reasons for staying in the home in case of children having families (provide details)		-		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	25	25
d)	15-18 years	-	9	9
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	1	1
d)	1-2 years	-	3	3
e)	2-3 years	-	6	6
f)	3-4 years	-	15	15
g)	4-5 years	-	5	5
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total



		Girls	Boys			
e)	Mentally challenged	-	9	9		
f)	Autism	-	-	-		
g)	Physically challenged	-	2	2		
h)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			Accommodation, Food, Clothes, Education and Health			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes			
Any other registration			-			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided			Accommodation, Food, Clothes, Education and Health			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	-	-	-	-	
b)	Classrooms	1	36 * 25	100	34	
c)	Sick room/ First Aid Room	1	13 * 10	-	-	
d)	Kitchen	1	17 * 21	100	34	
e)	Dinning Hall	-	-	-	-	
f)	Recreation room	1	36 * 21	100	34	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	3	13 * 10	3	3	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	16	4 * 6	100	34	
l)	Separate Latrines for boys and girls	18	5 * 2 ½	100	34	
m)	Store room	8	13 * 10	-	-	
n)	Play Ground	1	-	100	34	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				-		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned	Actual	Educational	Salary /	Associated

		Strength	Strength	Qualification	Honora r-um per month	with the Institution (Month/ Year)
a)	Superintendent/ Project Manager	1	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	2	1	10 <sup>th</sup>	16,541	-
g)	Educator	3	3	B.A. B.ED.	29,528	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	1	1	10 <sup>th</sup>	14,341	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	1	1	M.A.	25,192	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	16,541	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	4	4	-	53,523	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	2	-	26,254	-
r)	Any other	-	-	-	-	-
	Total	15	14			

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		Child Welfare Samiti
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Family background and life history of children
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>

j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Medical Care Unit	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		Monthly	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		Yes	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		No	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		Nutrition Food	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	5	Year
d)	Under garments	1	Year
e)	Towel	1	Year
f)	Durry	1	3 Year
g)	Blanket	1	5 Year
h)	Pillow	1	Year
i)	Shoes/ Chappal	1	Year
j)	Tooth powder/paste	1	Month
k)	Soap	1	Month
l)	Oil	1	Month
m)	Utensils (Plate and Glass)	1 Set	5 Year
<b>EDUCATION</b>			

Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises				Yes	No	
a)	Pre-school				-	-	
b)	Primary				√	-	
c)	Secondary				-	√	
d)	Higher				-	√	
e)	Non-formal classes				-	√	
f)	Private coaching				-	√	
g)	Bridge Course				-	√	
h)	Any other				-	√	
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	34	34	-	Govt.	1.5 Km	By Walk
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students					Yes		
If Yes, then how much per child month					No		
Whether the educational facilities are adequate for children					No		
If No, what are the other facilities required					-		
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		

Whether instructors are trained		Yes	
If Yes, details of qualification		B.A. B. Ed.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course		No	
Difficulty (if any)		No	
<b>RECREATIONAL FACILITIES</b>			
Whether recreational facilities are available		Yes	
If yes, what are the recreation facilities available for children in Institution			
S.No.	Activity	Please Tick mark against activity	Frequency-daily, per week, monthly, yearly
a)	Indoor games	√	Daily
b)	Outdoor games	-	-
c)	Music	-	-
d)	Television	√	Daily
e)	Picnic	-	-
f)	Outings	-	-
g)	Cultural Programme	√	Monthly
h)	Yoga	√	Weekly
i)	Debates	√	Half-Yearly
j)	Radio	-	-
k)	Any Other	-	-
<b>LIBRARY</b>			
Whether library facilities are available or not		No	
If Yes, Opening timing or day		-	
What types of books provide for Children		-	
<b>SANITATION AND HYGIENE</b>			
Whether Sanitation and Hygiene is maintained in the home through following facilities			
S. No.	Details of Sanitation and Hygiene	Yes/No	
a)	Sufficient treated and filtered drinking water	Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes	
c)	Proper drainage System	Yes	
d)	Arrangements for disposal of garbage	Yes	
e)	Protection from mosquitoes	Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes	
h)	Sufficient space for washing	Yes	
i)	Clean and fly-proof kitchen	Yes	
<b>CO-ORDINATION AND COLLABORATION</b>			
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No	
What type of Co-operation and Co-ordination has been received for homes		-	
<b>MONITORING AND EVALUATION</b>			

Mechanism used by the Institution to monitor the activities of homes	No
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	No
If Yes,	
a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>UP/02/GO/105</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Govt. Children Home (Boys)</b>	
Contact Details				
a) Name of Superintendent/Secretary			Nand Lal Singh	
b) Address			<b>Govt. Children Home, Dailwara, Lalitpur</b>	
c) Phone			09453877288	
d) Fax			-	
e) Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			Mahila Kalyan	
Year of Establishment of the Home			1980	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			23	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
s)	0-5 years	-	-	-
t)	5-10 years	-	4	4
u)	10-15 years	-	14	14
v)	15-18 years	-	5	5
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	6	6
b)	4-6 month	-	-	-
c)	6-12 month	-	4	4
d)	1-2 years	-	5	5
e)	2-3 years	-	3	3
f)	3-4 years	-	2	2
g)	4-5 years	-	3	3
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total

		Girls	Boys			
a)	Mentally challenged	-	-	-		
b)	Autism	-	-	-		
c)	Physically challenged	-	-	-		
d)	Any other (please specify)	-	-	-		
What are the facilities and support services provided for the children staying in Home			Accommodation, Food, Clothes, Education.			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-			
Any other registration			-			
Whether the Institution is certified as Fit Institution by						
a)	Juvenile Justice Board	-				
b)	Child Welfare Committee	√				
If Yes, Please Specify the Facilities provided			-			
<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	√				
b)	Rented	-				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	5	-	100	23	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	-	-	-	-	
d)	Kitchen	1	-	-	-	
e)	Dinning Hall	1	-	-	-	
f)	Recreation room	-	-	-	-	
g)	Library	-	-	-	-	
h)	Counselling & Guidance room	-	-	-	-	
i)	Office rooms	1	-	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	10	-	-	-	
l)	Separate Latrines for boys and girls	8	-	-	-	
m)	Store room	2	-	-	-	
n)	Play Ground	1	-	-	-	
o)	Vocational Training Centre	6	-	-	-	
Total area of the Campus (Sq. ft.)				5 Acres		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honora	Associated with the



					r-um per month	Institution (Month/ Year)
a)	Superintendent/ Project Manager	2	-	M.A.	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	2	1	-	-	-
g)	Educator	2	-	-	-	-
h)	Vocational Instructor	6	1	-	-	-
i)	Store-keeper cum Accountant/ LDC	2	1	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	1	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	2	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	10	8	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	2	1	-	-	-
r)	Any other Psychologist	1	1	-	-	-
	Supervisor	4	3	-	-	-
	Care taker	2	1			
	Total	36	19			

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		-
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>

g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	Yes	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		Yes	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	
b)	Winter Clothing(Jersey)	3	
c)	School Uniform	1	
d)	Under garments	3	
e)	Towel	2	
f)	Durry	-	
g)	Blanket	5	
h)	Pillow	-	
i)	Shoes/ Chappal	2	
j)	Tooth powder/paste	2	
k)	Soap	2	

l)	Oil	100 ml					
m)	Utensils (Plate and Glass)	1 Set					
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes	No				
	Pre-school	-	-				
a)	Primary	√	-				
b)	Secondary	-	-				
c)	Higher	-	-				
d)	Non-formal classes	-	-				
e)	Private coaching	-	-				
f)	Bridge Course	-	-				
g)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	23	23	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						Two Teachers	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	23	-	23	3 ½ Years		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		

m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				ITI	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				Water Problems, Vehicle, Teachers and Staff	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		-	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		Weekly	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Story Books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			No	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			No	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			Yes	
<b>CO-ORDINATION AND COLLABORATION</b>					

Whether the Organization/Institution is Networking with other Govt., NGOs etc	-
What type of Co-operation and Co-ordination has been received for homes	-
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	No
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes,	
a) Number of Training Programmes organized	1
b) Details of Training Programmes	Vidhik Saskharta Divas
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	Arushi
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Friends Club ★ Bharat Bikas Parishad
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>UP/03/GO/106</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Govt. Children Home, Varanasi</b>	
Contact Details				
Name of Superintendent/Secretary			Smt. Savatri Kuksaiti	
Address			<b>Govt. Children Home, Ram Nagar, Varanasi</b>	
Phone			09455495036	
Fax			-	
Email			-	
<b>Type of Institution</b>			<b>Children Home (Boys)</b>	
Run by			State Government, (Women Welfare Department, U.P. Luknow)	
Year of Establishment of the Home			1964	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			200	
b) Present Strength			33	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			Due to unknown address of the inmates	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	26	26
d)	15-18 years	-	7	7
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	3	3
b)	4-6 month	-	-	-
c)	6-12 month	-	4	4
d)	1-2 years	-	9	9
e)	2-3 years	-	4	4
f)	3-4 years	-	5	5
g)	4-5 years	-	5	5
h)	More than 5 Years	-	3	3
Number of "Children with special needs" in the home				

S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	2	2	
b)	Autism	-	-	-	
c)	Physically challenged	-	2	2	
d)	Any other (please specify)	-	0	0	
What are the facilities and support services provided for the children staying in Home			Facilities provided according to govt. manual & regulation		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
Juvenile Justice Board			-		
Child Welfare Committee			√		
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned			√	
b)	Rented			-	
c)	Lease			-	
d)	Donated			-	
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	1200'	100	23
b)	Classrooms	2	300'	-	-
c)	Sick room/ First Aid Room	1	160'	-	-
d)	Kitchen	2	181'	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-
h)	Counselling & Guidance room	1	150'	-	-
i)	Office rooms	1	150'	-	-
j)	Workshops	3	1080'	-	-
k)	Separate Bathrooms for boys and girls	4	84'	-	-
l)	Separate Latrines for boys and girls	5	60'	-	-
m)	Store room	1	150'	-	-
n)	Play Ground	1	1 Acre	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				10 Hectare	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					
S. No	Details of Staff	Sanctioned	Actual	Educational	Salary / Associated

		Strength	Strength	Qualification	Honora r-um per month	with the Institution (Month/ Year)
a)	Superintendent/ Project Manager	1	1	B.A., B.Ed. B. Lib.	30,960	2009
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	1	1	M.A.	24,336	2006
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	1	1	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	Intermediate	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	4	-	Intermediate	13,802	2010
p)	Helper	1	-	-	13,359	2008
q)	Sweeper	1	1	-	-	-
r)	Any other					
	Assistant Suptd.	1	1	B.A.	17,186	2010
	Assistant Teacher	2	1	B.A.	29096	2002
	Total	13	7			

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes		Yes
If Yes Please mention		-
Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		MPR
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input type="checkbox"/>
c)	Supervision register	<input type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>



g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		Yes	
If yes, Opening of day, time and duration of MCU		9a.m. to 4p.m. As required	
Frequency of Doctor's visit		Weekly	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	Yes	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		-	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Two time meal	
What types of special diet is provided for sick infant or children		As directed by physician	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Yearly
b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	1	-
d)	Under garments	2	Yearly
e)	Towel	1	-
f)	Durry	1	Yearly
g)	Blanket	2	-
h)	Pillow	1	Yearly
i)	Shoes/ Chappal	2	Yearly
j)	Tooth powder/paste	-	-

k)	Soap		-	-			
l)	Oil		-	-			
m)	Utensils (Plate and Glass)		1 Set	Yearly			
<b>EDUCATION</b>							
Whether educational facilities are available for children			Yes				
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes	No			
a)	Pre-school		-	√			
b)	Primary		√	-			
c)	Secondary		√	-			
d)	Higher		-	√			
e)	Non-formal classes		-	√			
f)	Private coaching		-	√			
g)	Bridge Course		-	√			
h)	Any other		-	√			
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	6	-	6	Detention Course		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		
j)	Pickle making	-	-	-	-		

k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Cane- High School, Hosiery & Tailoring	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other → Dish(Airtel)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				10 a.m. to 5 p.m.	
What types of books provide for Children				Moral & Historical Books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			No	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			No	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			No	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			No	
h)	Sufficient space for washing			Yes	
i)	Clean and fly-proof kitchen			No	

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What type of Co-operation and Co-ordination has been received for homes	Teaching & Painting
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	No
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the Institution has organized any training programme regarding JJ Act for its Staff	Yes
If Yes,	
a) Number of Training Programmes organized	1
b) Details of Training Programmes	About JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	About JJ Act.
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	★ Dolly Foundation Sarnath Varanasi
<b>SUGGESTION OF CWC/INSPECTION COMMITTEE</b>	
Suggestion of CWC/Inspection Committee	★ Work properly
<b>MENTION AREAS/ISSUES ON WHICH THE STAFF/MEMBERS OF YOUR ORGANIZATION/ INSTITUTION WOULD LIKE TO ATTEND THE TRAINING PROGRAMME/WORKINGS AT INSTITUTION LIKE NIPCCD TO BUILD THEIR CAPACITIES</b>	
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>UP/01/ NGO/107</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Manisha Mandir	
Address for Communication	Viram Khand-2, Gomti Nagar, Lucknow-226010	
Telephone (with STD code)	0522-2392835, 09451123170	
Fax	0522-2392835	
Email ID	maasarojini_1937@yahoo.co.in	
Website of Organization	manishamandir.org	
Type of Child Care Institution being run	Children Home, Shishu Greh	
Whether run by	NGO	
Name and contact of Chief Functionary	Dr. Sarojini Agrawal, President 09451123170	
Vision of NGO	To avail home for every orphan, destitute girl	
Mission of NGO	To work for the welfare infants, orphan, destitute girl	
Key Objectives	To bring up, educate and rehabilitate them	
Major Activities	To pick up and admit helpless children, save & secure them, to give infants in adoption, work to prevent abortion of girl pregnancy	
Target group/ Stakeholders	Children	
Geographical location/area	Viramkhand, Gominagar	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	24-09-1984, licensed on 18-03-1985	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Societies Registration Act, 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
27-05-1993	-	Lucknow
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	136550129	
Any other Registration/ Recognition with Central / State Govt.:	Firms and Societies Registrar, Uttar Pradesh, Registration No: 4360/1988-89 Dated: 29-11-1988	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	No: 0177/10. Dated: 24 <sup>th</sup> May, 2010	
If No, give reasons thereof	-	
Number of Governing Body Members	10	

Physical Assets of the Organization		Own Building, Furniture			
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization		-			
Total No. of Professional Staff					
a) Male		2			
b) Female		6			
Total number of					
a) Full Time		3			
b) Part time Staff		5			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
10.6		9.8		11.8	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	√	-	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level			Annual Report, Brochure, Leaflet, Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside			No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>			Manisha Mandir		
Contact Details					
a) Name of Superintendent/Secretary			Dr. Sarojini Agrawal		
b) Address			Gomti Nagar, Lucknow		
c) Phone			0522-2392835		
d) Fax			0522-2392835		
e) Email			maasarojini_1937@yahoo.co.in		
<b>Type of Institution</b>			<b>Children Home (Girls)</b>		
Run by			NGO (Manisha Mandir)		
Year of Establishment of the Home			24-09-1984		
Supported by			Public Cooperation (Manisha Mandir Sansthan)		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>		
Number of inmates					
a) Capacity			50		
b) Present Strength			42		
Number of Children lodged in the home having families residing in the same State/UT			-		
Reasons for staying in the home in case of children having families (provide details)			-		
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		

a)	0-5 years	1	-	1
b)	5-10 years	24	-	24
c)	10-15 years	17	-	17
d)	15-18 years	-	-	-

Details of Stay of Children in the home

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	1	-	1
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	41	-	41

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

Food, Shelter, Education etc

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960

Yes

Any other registration

Income Tax Act 1961

Whether the Institution is certified as Fit Institution by

√

a) Juvenile Justice Board

√

b) Child Welfare Committee

-

If Yes, Please Specify the Facilities provided

-

**INFRASTRUCTURE**

Infrastructure available

a) Owned

√

b) Rented

-

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	3	-	-	-
b)	Classrooms	4	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	2	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-

h)	Counseling & Guidance room	1	-	-	-
i)	Office rooms	2	-	-	-
j)	Workshops	3	-	-	-
k)	Separate Bathrooms for boys and girls	15	-	-	-
l)	Separate Latrines for boys and girls	16	-	-	-
m)	Store room	4	-	-	-
n)	Play Ground	3	-	-	-
o)	Vocational Training Centre	2	-	-	-

Total area of the Campus (Sq. ft.) 30,000

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1	M.A. Ph.D.	Honorarium	26 Years
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	1	M.S.W.	Honorarium	5 Years
d)	Case Worker	-	1	-	-	-
e)	Doctor (Part time or Full time)	-	2	M.B.B.S.	Honorarium	18 years
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	1	M.A.	1000/-	3 Years
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	1	B.A.	2000/-	2 Years
k)	Sports/ Yoga Teacher	-	1	B.A.	-	-
l)	Driver	-	1	10 <sup>th</sup>	4000/-	6 Years
m)	Cook	-	-	-	-	-
n)	House Aunty	-	2	M.A.	2000*2	14 Years
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	1	-	500/-	15 Years
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	12	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention -



Whether the organization maintains any specific Proforma for recording details of Information of every child		Orphan, Children of prisoners, Children of handicapped, Poor Children
If Yes, what kind of information you have collected from children		-
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	-
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	-
f)	Stock Register	-
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	-
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify) → Study Reports Attendance Register	<input checked="" type="checkbox"/>
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Tonics, Nutrilite
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		-
Frequency of Doctor's visit		Once or twice in a month
Whether any trained Staff for first-aid		No
<b>Referral of Cases</b>		
a)	Govt. Hospital	-
b)	Dispensary	-
c)	Any other → Private Hospital	<input checked="" type="checkbox"/>
How many children are suffering from communicable diseases and HIV/AIDS		None
Any specialized services are provided for them		No
If yes, Please provide in details		-
Whether ambulance facility is available for patients		No
Any other Facilities		A tata specio car vehicle
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Two
What types of special diet is provided for sick infant or children		Milk, Bread, Khichri, Daliya etc
How many cooks are there		One
Whether children are helping at the time of cooking in any way		Yes
Whether any Nutrition and Child Development Officer is there		No
<b>CLOTHING AND BEDDING</b>		
How many sets of clothes, bedding and other articles are given to children		

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	8	-
b)	Winter Clothing(Jersey)	4	-
c)	School Uniform	2	-
d)	Under garments	4	-
e)	Towel	2	-
f)	Durry	1	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/Chappal	4	-
j)	Tooth powder/paste	1	-
k)	Soap	2	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	4	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	-	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	2	-	2	Private	-	-
b)	Primary	32	-	32	Private	3 km	Tata Specio
c)	Secondary	5	-	5	Private	8 km	Tata Specio
d)	Higher	3	-	3	Private	8 km	Tata Specio
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	12	12	2 Months

b)	Beauty Culture	-	-	-	-
c)	Computer	-	10	10	3 Months
d)	Jute bags and 'moti' work	-	4	4	2 Months
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				-	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	√		Year	
f)	Outings	-		-	
g)	Cultural Programme	√		Monthly	
h)	Yoga	√		Daily	
i)	Debates	√		Daily	
j)	Radio	-		-	
k)	Any Other: → Act play	√		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				6:00-8:00 p.m.	
What types of books provide for Children				General Knowledge, Story Books, Poetry, Magazines etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	

b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		NIPCCD & CARA
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Pepsico India (U.P. Unit) ★ Social Work Department
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ CARA, Ministry of Women & Child Welfare Department, U.P. and Govt. of India

<b>UP/02/ NGO/108</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Jagat Narain Montessery Junior High School Samiti	
Address for Communication	554/226/6/1 Kailashpuri, D Jail Road, Alanbagh	
Telephone (with STD code)	0522-2481675	
Fax	Nil	
Email ID	Nil	
Website of Organization	Nil	
Type of Child Care Institution being run	Shishu Greh	
Whether run by	NGO	
Name and contact of Chief Functionary	Smt. Puspa Kanaujia, Secretary-9305797686	
Vision of NGO	-	
Mission of NGO	Care & Protection of Street Children	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Women and Children	
Geographical location/area	Alanbagh, Lucknow	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	13-11-1993	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
13-11-1993	1994/1998-99	Lucknow
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	No	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	0121, Date: 03-10-07	
If No, give reasons thereof	-	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	14	
Total No. of Professional Staff		
a) Male	2	
b) Female	6	
Total number of		

a) Full Time						8
b) Part time Staff						6
<b>FINANCIAL MANAGEMENT</b>						
Annual Budget of Organization for last three years (In Lakhs)						
2009-10		2008-09		2007-08		
4,78,664.00		5,11,564.00		1,96,170.00		
Sources of Funding of the NGO (Cash/kind/other)						
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Membership Fee's	
-	-	-	Cash	Cash	Cash	
<b>DOCUMENTATION</b>						
Which of the following documents/communication material are maintained at the organizational level				Annual Report, Brochure and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>						
<b>Name of Child Care Institution</b>				Sent Gadge Bal Greh		
Contact Details						
a) Name of Superintendent/Secretary				Smt Puspa Kanaujia		
b) Address				554/226/6/1, Kailash Puri, jail Road, Lucknow		
c) Phone				0522-2481675		
d) Fax				Nil		
e) Email				Nil		
<b>Type of Institution</b>				<b>Children Home (Both Boys and Girls)</b>		
Run by				NGO (Jagat Narain Montessery Junior High School Samiti)		
Year of Establishment of the Home				-		
Supported by				Donation by Public		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>		
Number of inmates						
a) Capacity				100		
b) Present Strength				45		
Number of Children lodged in the home having families residing in the same State/UT				45		
Reasons for staying in the home in case of children having families (provide details)				-		
Age breakup of children						
S.No.	Age	Number of Children		Total		
		Girls	Boys			
a)	0-5 years	16	12	28		
b)	5-10 years	7	10	17		
c)	10-15 years	-	-	-		
d)	15-18 years	-	-	-		
Details of Stay of Children in the home						

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	2	3	5
b)	4-6 month	5	7	12
c)	6-12 month	8	20	28
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

-

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960

No

Any other registration

No

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board

√

b) Child Welfare Committee

-

If Yes, Please Specify the Facilities provided

-

**INFRASTRUCTURE**

Infrastructure available

a) Owned

-

b) Rented

√

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	-	-	-
b)	Classrooms	4	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	-	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys	-	-	-	-

	and girls				
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	-	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	M.S.W.	6,000	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	-	1500	-
n)	House Aunty	2	-	-	2000*2	-
o)	Security Guard	-	-	-	-	-
p)	Helper	1	-	-	1000	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
Total		5	-	-	12,500	-

#### **CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	No
If Yes, what kind of information you have collected from children	N.A.
Maintenance of Registers/Record Maintenance	



S. No.	Details of Register	Please tick $\checkmark$	
a)	Admission and discharge register	$\checkmark$	
b)	Individual Care Plan	-	
c)	Supervision register	$\checkmark$	
d)	Medical file or medical report	$\checkmark$	
e)	Nutrition diet file	$\checkmark$	
f)	Stock Register	$\checkmark$	
g)	Visitor's book	$\checkmark$	
h)	Case file	-	
i)	Inquiry report file	-	
j)	Stock register	-	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		Yes	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		No	
Frequency of Doctor's visit		Once in a month	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	-	
b)	Dispensary	$\checkmark$	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		-	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	1	Year

d)	Under garments	2	Year
e)	Towel	1	Year
f)	Durry	1	Year
g)	Blanket	1	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	1	Year
j)	Tooth powder/paste	1	Year
k)	Soap	-	-
l)	Oil	-	-
m)	Utensils (Plate and Glass)	-	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	√	-
b)	Primary	√	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	-	-
f)	Private coaching	-	-
g)	Bridge Course	-	-
h)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				No	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	-		-	
b)	Outdoor games	-		-	
c)	Music	-		-	
d)	Television	-		-	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				10:00-5:00 p.m.	
What types of books provide for Children				Comics, Stories Books etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets			Yes	

	(at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		N.A.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Management committee of NGO
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Monthly meeting
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>UP/03/ NGO/109</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Food for Life Vrindavan Society	
Address for Communication	Chaitanya Vihar, Burja Road, Vrindavan	
Telephone (with STD code)	0565-2540646	
Fax	0565-2540646	
Email ID	vrinda@fflvrindavan.org	
Website of Organization	Fflvrindavan.org	
Type of Child Care Institution being run	Children Home and Shelter home/ Drop-in-Centre	
Whether run by	NGO	
Name and contact of Chief Functionary	Sudha Arora 9837647655	
Vision of NGO	It is dedicate to the poorest to the poor, educating and guiding them	
Mission of NGO	In pursuance of a fulfilling life, enabling them to become exemplary members of society.	
Key Objectives	To make the people self reliant by providing them education and vocational training	
Major Activities	100% free schools, Social development self help group, Vocational training	
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	18-01-2002	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
18-01-2002	41291	New Delhi
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	231660410	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	0171/10	
If No, give reasons thereof	-	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	220	
Total No. of Professional Staff		

a) Male				20	
b) Female				70	
Total number of					
a) Full Time				150	
b) Part time Staff				70	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
585.336		523.256		313-658	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Membership Fee's
-	-	-	-	-	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Brochure, Leaflet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Sandipani Muni Children Home	
Contact Details					
a) Name of Superintendent/Secretary				Sudha Arora	
b) Address				49, Kishori Kunj, Madhuvan Colony Vrindavan	
c) Phone				9837647655	
d) Fax				-	
e) Email				vrinda@fflvrindavan.org	
<b>Type of Institution</b>				<b>Children Home (Both Boys and Girls)</b>	
Run by				NGO (Food for life Vrindavan Society)	
Year of Establishment of the Home				2004	
Supported by				NGO's own resources	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				-	
b) Present Strength				16	
Number of Children lodged in the home having families residing in the same State/UT				12	
Reasons for staying in the home in case of children having families (provide details)				Either parents is begging, handicapped, Mentally challenged not able to look after the child	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	1	1	2	
b)	5-10 years	2	5	7	

c)	10-15 years	-	7	7	
d)	15-18 years	-	-	-	
<b>Details of Stay of Children in the home</b>					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	5	1	6	
d)	1-2 years	6	1	7	
e)	2-3 years	2	1	3	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
<b>Number of "Children with special needs" in the home</b>					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			The organization has its own facilities for providing higher education & vocational training and homely environment with the dedicated volunteers to provide all round development to the children		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	-			
c)	Lease	√			
d)	Donated	-			
<b>Details of Accommodation for Children and Institutional Infrastructure</b>					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	-	-	16
b)	Classrooms	2	-	-	16
c)	Sick room/ First Aid Room	1	-	-	16
d)	Kitchen	1	-	-	16

e)	Dinning Hall	1	-	-	16
f)	Recreation room	1	-	-	16
g)	Library	1	-	-	16
h)	Counseling & Guidance room	1	-	-	16
i)	Office rooms	1	-	-	16
j)	Workshops	1	-	-	16
k)	Separate Bathrooms for boys and girls	3	-	-	16
l)	Separate Latrines for boys and girls	3	-	-	16
m)	Store room	1	-	-	16
n)	Play Ground	1	-	-	16
o)	Vocational Training Centre	1	-	-	16

Total area of the Campus (Sq. ft.)	3550
------------------------------------	------

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light	Yes
---	-----

### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

### CRITERIA FOR ADMISSION IN SHELTER HOMES



Whether the organization is following any criteria for admission of children in Homes	Yes	
If Yes Please mention	Every child is admitted by the recommendation of CWC Mathura	
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes	
If Yes, what kind of information you have collected from children	-	
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	-
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	-
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	$\checkmark$
k)	Any other(Please Specify)	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children	NGO runs own hospital	
Does the home have a Medical Care Unit for health check-up of Children	Yes	
If yes, Opening of day, time and duration of MCU	Seven days of week	
Frequency of Doctor's visit	Twice in a day	
Whether any trained Staff for first-aid	Yes	
<b>Referral of Cases</b>		
a)	Govt. Hospital	-
b)	Dispensary	-
c)	Any other	$\checkmark$
How many children are suffering from communicable diseases and HIV/AIDS	None	
Any specialized services are provided for them	-	
If yes, Please provide in details	-	
Whether ambulance facility is available for patients	Yes	
Any other Facilities	X-Ray, Pathology, Incubation	
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes	Yes	
How many times meals are provided in a day	Four	
What types of special diet is provided for sick infant or children	Khichri, Daliya, Soup, Boiled pulses and as directed by doctor	
How many cooks are there	One	

Whether children are helping at the time of cooking in any way		Yes					
Whether any Nutrition and Child Development Officer is there		Yes					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	5			6 Months		
b)	Winter Clothing(Jersey)	3			6 Months		
c)	School Uniform	2			6 Months		
d)	Under garments	5			6 Months		
e)	Towel	1			Year		
f)	Durry	1			-		
g)	Blanket	1			-		
h)	Pillow	1			-		
i)	Shoes/Chappal	2			-		
j)	Tooth powder/paste	1			-		
k)	Soap	1			-		
l)	Oil	1			-		
m)	Utensils (Plate and Glass)	2			-		
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
	Formal School on Premises	Yes			No		
a)	Pre-school	√			-		
b)	Primary	√			-		
c)	Secondary	√			-		
d)	Higher	√			-		
e)	Non-formal classes	√			-		
f)	Private coaching	√			-		
g)	Bridge Course	-			-		
h)	Any other: Computer Course	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	

If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	2	2	-
b)	Beauty Culture	-	2	2	-
c)	Computer	-	8	8	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	6	6	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					

S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		-
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		-
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Orientation training on Child Rights & Protection for their welfare (NIPCCD, Lucknow, U.P.)
<b>DEPARTMENTAL COOPERATION</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		Children who need emotional support & care

<b>UP/04/ NGO/110</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Samarpit Social Welfare Sansthan	
Address for Communication	Vill- Kurali PO-Kota, Saharanpur Admin Office-2/2442, Gill Colony, S.R.E	
Telephone (with STD code)	9719418437,9359206939	
Fax	-	
Email ID	Samarpit2008@rediffmail.com	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	R.P.Singh, 9719418437	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	Manakmav Saharanpur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	31-03-2001	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	21 Act, 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
31-03-2001	3072	Saranpur (U.P.)
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	State Govt. Department of Women Welfare, Lucknow	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	<ul style="list-style-type: none"> <li>★ Niyantaran Board Mahila Bal Vikas U.P. Reco. No 110289</li> <li>★ Diractrat Mahila Kalyan U.P. Sasnadesh No 5391/60-1-08-1/13 (103 Dated 22/02/07)</li> <li>★ U.P. Govt. Mahila &amp; Balvikas Sasnadesh No 2401/60-01-08-01/13 (36/08 dated 8/July/08)</li> </ul>	
If No, give reasons thereof	-	
Number of Governing Body Members	7	
Physical Assets of the Organization	Yes	
<b>MANPOWER OF ORGANIZATION</b>		

Total manpower of your Organization		Managing Committee			
Total No. of Professional Staff					
a) Male		16			
b) Female		10			
Total number of					
a) Full Time		20			
b) Part time Staff		6			
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
30,52,388,00		18,60,600,00		Nil	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Membership Fee's
-	√	√	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Report and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				-	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Bal Greh Balak	
Contact Details					
a) Name of Superintendent/Secretary				Pramod Kumar	
b) Address				Manakmau Saharanpur	
c) Phone				9719418437/ 9359206939	
d) Fax				-	
e) Email				Samarpit2008@rediffmail.com	
<b>Type of Institution</b>				<b>Children Home (Boys)</b>	
Run by				NGO (Samarpit Social Welfare Sansthan)	
Year of Establishment of the Home				2008	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				100	
b) Present Strength				18	
Number of Children lodged in the home having families residing in the same State/UT				15	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	

b)	5-10 years	-	11	11	
c)	10-15 years	-	5	5	
d)	15-18 years	-	-	-	
<b>Details of Stay of Children in the home</b>					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	
c)	6-12 month	-	2	2	
d)	1-2 years	-	-	-	
e)	2-3 years	-	14	14	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
<b>Number of "Children with special needs" in the home</b>					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	16	16	
b)	Autism	-	16	16	
c)	Physically challenged	-	16	16	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Vocational Training, Health and accommodation		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No		
Any other registration			Act 1860		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Education, Vocational Training, Health and accommodation		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
<b>Details of Accommodation for Children and Institutional Infrastructure</b>					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	-	-	-
b)	Classrooms	2	-	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	-	-	-	-
g)	Library	-	-	-	-

h)	Counseling & Guidance room	1	-	-	-
i)	Office rooms	2	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	-	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.) 5400

Whether the dormitories, classrooms and workshops have sufficient ventilation and Light Yes

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A. Sociology	15,000	-
b)	Social Welfare Officer	1	1	M.A. Sociology	12,000	-
c)	Counselor	1	1	B.A. Sociology	10,000	-
d)	Case Worker	4	4	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	1	1	Inter, Diploma	7,000	-
g)	Educator	2	2	B.A. B. Ed.	8,000	-
h)	Vocational Instructor	1	1	-	-	-
i)	Store-keeper cum Accountant	1	1	-	-	-
j)	Music Teacher	1	1	B.A.	-	-
k)	Sports/ Yoga Teacher	1	1	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	2	2	8 <sup>th</sup>	-	-
n)	House Aunty	2	2	-	-	-
o)	Security Guard	2	2	-	-	-
p)	Helper	2	2	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes Yes

If Yes Please mention -



Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	$\checkmark$
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	$\checkmark$
j)	Stock register	$\checkmark$
k)	Any other(Please Specify)	-

#### Minimum Standard of Care

##### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	-
Referral of Cases	
d) Govt. Hospital	$\checkmark$
e) Dispensary	-
f) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	-
Any specialized services are provided for them	No
If yes, Please provide in details	-
Whether ambulance facility is available for patients	No
Any other Facilities	No

##### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	-
What types of special diet is provided for sick infant or children	-
How many cooks are there	-
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

##### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency

			(Month/Year)
a)	Summer Clothing	1	-
b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	1	-
d)	Under garments	1	-
e)	Towel	1	-
f)	Durry	1	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/Chappal	2	-
j)	Tooth powder/paste	1	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	2 Set	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

	Formal School on Premises	Yes	No
a)	Pre-school	-	-
b)	Primary	√	-
c)	Secondary	-	-
d)	Higher	-	-
e)	Non-formal classes	√	-
f)	Private coaching	-	-
g)	Bridge Course	√	-
h)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children -

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-

c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	-		-	
g)	Cultural Programme	√		-	
h)	Yoga	√		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				2:00-5:00 p.m., Daily	
What types of books provide for Children				Magazines, Stories Books and Newspaper	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes,			Yes	

	maintenance & cleanliness of the premises	
c)	Proper drainage System	-
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		No
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		No
<b>DEPARTMENTAL COOPERATION</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>UP/05/ NGO/111</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Gautam Budha Shikshan Sansthan	
Address for Communication	Mudadiha, Gonda (U.P)	
Telephone (with STD code)	9792121484, 9451027441	
Fax	No	
Email ID	gbss_bbn@rediffmail.com	
Website of Organization	No	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Jagdish Yadav	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	Junior High School, CBR Courses	
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	18-7-2005	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	21 Act, 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
18-07-2005	454	Fazaibad
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	136460027	
Any other Registration/ Recognition with Central / State Govt.:	PWD Act, NT, CBR	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	-	
If No, give reasons thereof	-	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	7	
Total No. of Professional Staff		
a) Male	3	
b) Female	4	
Total number of		
a) Full Time	7	
b) Part time Staff	0	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
539,350.00		499,603.00		448,835.00	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Membership Fee's
-	-	-	-	√	-
DOCUMENTATION					
Which of the following documents/communication material are maintained at the organizational level				Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>				-	
Contact Details					
a) Name of Superintendent/Secretary					
b) Address					
c) Phone					
d) Fax					
e) Email					
<b>Type of Institution</b>					
Run by					
Year of Establishment of the Home					
Supported by					
<b>Whether registered under 34(3) of JJ Act with the State Government</b>					
Number of inmates					
a) Capacity					
b) Present Strength					
Number of Children lodged in the home having families residing in the same State/UT					
Reasons for staying in the home in case of children having families (provide details)					
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years				
b)	5-10 years				
c)	10-15 years				
d)	15-18 years				
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month				
b)	4-6 month				
c)	6-12 month				

d)	1-2 years				
e)	2-3 years				
f)	3-4 years				
g)	4-5 years				
h)	More than 5 Years				
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged				
b)	Autism				
c)	Physically challenged				
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home					
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960					
Any other registration					
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board				
b)	Child Welfare Committee				
If Yes, Please Specify the Facilities provided					
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned				
b)	Rented				
c)	Lease				
d)	Donated				
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories				
b)	Classrooms				
c)	Sick room/ First Aid Room				
d)	Kitchen				
e)	Dinning Hall				
f)	Recreation room				
g)	Library				
h)	Counseling & Guidance room				
i)	Office rooms				
j)	Workshops				
k)	Separate Bathrooms for boys and girls				
l)	Separate Latrines for boys and girls				
m)	Store room				
n)	Play Ground				

o)	Vocational Training Centre				
Total area of the Campus (Sq. ft.)					
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					

**MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager					
b)	Social Welfare Officer					
c)	Counselor					
d)	Case Worker					
e)	Doctor (Part time or Full time)					
f)	Paramedical Staff					
g)	Educator					
h)	Vocational Instructor					
i)	Store-keeper cum Accountant					
j)	Music Teacher					
k)	Sports/ Yoga Teacher					
l)	Driver					
m)	Cook					
n)	House Aunty					
o)	Security Guard					
p)	Helper					
q)	Sweeper					
r)	Any other (Please Specify)					
	Total	-	-	-	-	-

**CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes		
If Yes Please mention		
Whether the organization maintains any specific Proforma for recording details of Information of every child		
If Yes, what kind of information you have collected from children		
Maintenance of Registers/Record Maintenance		
S. No.	Details of Register	Please tick <input type="checkbox"/>
a)	Admission and discharge register	
b)	Individual Care Plan	
c)	Supervision register	



d)	Medical file or medical report	
e)	Nutrition diet file	
f)	Stock Register	
g)	Visitor's book	
h)	Case file	
i)	Inquiry report file	
j)	Stock register	
k)	Any other(Please Specify)	

### Minimum Standard of Care

#### **MEDICAL CARE**

What are the health related services available for Children

Does the home have a Medical Care Unit for health check-up of Children

If yes, Opening of day, time and duration of MCU

Frequency of Doctor's visit

Whether any trained Staff for first-aid

Referral of Cases

a) Govt. Hospital

b) Dispensary

c) Any other

How many children are suffering from communicable diseases and HIV/AIDS

Any specialized services are provided for them

If yes, Please provide in details

Whether ambulance facility is available for patients

Any other Facilities

#### **NUTRITION AND DIET SCALE**

Whether any menu chart followed by homes

How many times meals are provided in a day

What types of special diet is provided for sick infant or children

How many cooks are there

Whether children are helping at the time of cooking in any way

Whether any Nutrition and Child Development Officer is there

#### **CLOTHING AND BEDDING**

How many sets of clothes, bedding and other articles are given to children

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing		
b)	Winter Clothing(Jersey)		
c)	School Uniform		
d)	Under garments		
e)	Towel		
f)	Durry		
g)	Blanket		
h)	Pillow		

i)	Shoes/Chappal		
j)	Tooth powder/paste		
k)	Soap		
l)	Oil		
m)	Utensils (Plate and Glass)		

### EDUCATION

Whether educational facilities are available for children

Are any of the educational facilities available within the institution

	Formal School on Premises		
a)	Pre-school		
b)	Primary		
c)	Secondary		
d)	Higher		
e)	Non-formal classes		
f)	Private coaching		
g)	Bridge Course		
h)	Any other: Computer Course		

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school						
b)	Primary						
c)	Secondary						
d)	Higher						
e)	Non-formal classes						
f)	Any other						

Whether the institution is providing any pocket money for out going students

If Yes, then how much per child month

Whether the educational facilities are adequate for children

If No, what are the other facilities required

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring				
b)	Beauty Culture				
c)	Computer				
d)	Jute bags and 'moti' work				
e)	Painting and Mehendi				
f)	Books binding				
g)	Printing				
h)	Auto Rickshaw/motor cycle/ mobile repairing				
i)	Candle making				
j)	Pickle making				

k)	Soap making				
l)	Textile Designing				
m)	Electrical trade				
n)	Shoes making/leather craft				
o)	Any other				
Whether instructors are trained					
If Yes, details of qualification					
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					
Difficulty (if any)					
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games				
b)	Outdoor games				
c)	Music				
d)	Television				
e)	Picnic				
f)	Outings				
g)	Cultural Programme				
h)	Yoga				
i)	Debates				
j)	Radio				
k)	Any Other				
<b>LIBRARY</b>					
Whether library facilities are available or not					
If Yes, Opening timing or day					
What types of books provide for Children					
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water				
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises				
c)	Proper drainage System				
d)	Arrangements for disposal of garbage				
e)	Protection from mosquitoes				
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)				
g)	Sufficient number of bathrooms (at least one bathroom for ten children)				
h)	Sufficient space for washing				
i)	Clean and fly-proof kitchen				

<b>CO-ORDINATION AND COLLABORATION</b>	
Whether the Organization/Institution is Networking with other Govt., NGOs etc	No
What types of Co-operation and Co-ordination received for homes	No
<b>MONITORING AND EVALUATION</b>	
Mechanism used by the Institution to monitor the activities of homes	-
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	-
Whether CWC members visit your institution regularly	Yes
<b>TRAINING NEEDS</b>	
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
If Yes,	
a) Number of Training Programmes organized	N.A.
b) Details of Training Programmes	N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	No
If Yes, Please specify	No
<b>DEPARTMENTAL COOPERATION</b>	
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	-
Suggestion of CWC/Inspection Committee	-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	-

<b>UP/06/ NGO/112</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Missionaries of Charity	
Address for Communication	50, B-Cantonment, kanpur	
Telephone (with STD code)	0512-2381477	
Fax	-	
Email ID	sadhana.ghosh@yahoo.com	
Website of Organization	No	
Type of Child Care Institution being run	Shishu Greh	
Whether run by	NGO	
Name and contact of Chief Functionary	Sister Nisha Rose	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children and Adolescent	
Geographical location/area	Kanpur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	-	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Society Registration Act	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
16 <sup>th</sup> March, 1959	S/3509-1958/59	Calcutta
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	N.A.	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	5391/60-1-08-1/13(103/03 Dt. 22th Feb.2007)	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	7	
Physical Assets of the Organization	Own Building	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	22	
Total No. of Professional Staff		
a) Male	-	
b) Female	-	
Total number of		
a) Full Time	22	
b) Part time Staff	0	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
-		-		-	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Membership Fee's
-	-	-	-	-	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				-	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Shishu Bhawan	
Contact Details					
a) Name of Superintendent/Secretary				Sister Nisha rose	
b) Address				50, B-Cantonment Kanpur	
c) Phone				0512-2381477	
d) Fax				-	
e) Email				sadhana.ghosh@yahoo.com	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO (Missionaries of Charity)	
Year of Establishment of the Home				1971	
Supported by				Donations	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
a) Capacity				50	
b) Present Strength				27	
Number of Children lodged in the home having families residing in the same State/UT				Don't know	
Reasons for staying in the home in case of children having families (provide details)				N.A.	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	20	7	27	
b)	5-10 years	-	-	-	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	5	3	8	
b)	4-6 month	4	2	6	

c)	6-12 month	11	2	13	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	1	1	
b)	Autism	-	-	-	
c)	Physically challenged	1	-	1	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Physiotherapy, Acupressure		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			No		
Any other registration			No		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	Yes			
b)	Child Welfare Committee	Yes			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories				
b)	Classrooms				
c)	Sick room/ First Aid Room				
d)	Kitchen				
e)	Dinning Hall				
f)	Recreation room				
g)	Library				
h)	Counseling & Guidance room				
i)	Office rooms				
j)	Workshops				
k)	Separate Bathrooms for boys and girls				
l)	Separate Latrines for boys and girls				
m)	Store room				

n)	Play Ground				
o)	Vocational Training Centre				
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager					
b)	Social Welfare Officer					
c)	Counselor					
d)	Case Worker					
e)	Doctor (Part time or Full time)					
f)	Paramedical Staff					
g)	Educator					
h)	Vocational Instructor					
i)	Store-keeper cum Accountant					
j)	Music Teacher					
k)	Sports/ Yoga Teacher					
l)	Driver					
m)	Cook					
n)	House Aunty					
o)	Security Guard					
p)	Helper					
q)	Sweeper					
r)	Any other (Please Specify)					
	Total	-	-	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Under JJ Act
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$



c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	N.A.
Frequency of Doctor's visit	Twice in a week or call on emergency
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	-
b) Dispensary	-
c) Any other → Nursing Home	√
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	N.A.
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	Yes
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	No
How many times meals are provided in a day	Three
What types of special diet is provided for sick infant or children	As suggested by doctors
How many cooks are there	Two
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	-	-
b)	Winter Clothing(Jersey)	-	-
c)	School Uniform	-	-
d)	Under garments	-	-
e)	Towel	-	-
f)	Durry	-	-
g)	Blanket	-	-

h)	Pillow	-	-				
i)	Shoes/Chappal	-	-				
j)	Tooth powder/paste	-	-				
k)	Soap	-	-				
l)	Oil	-	-				
m)	Utensils (Plate and Glass)	-	-				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
	Formal School on Premises	Yes	No				
a)	Pre-school	-	√				
b)	Primary	-	√				
c)	Secondary	-	√				
d)	Higher	-	√				
e)	Non-formal classes	-	√				
f)	Private coaching	-	√				
g)	Bridge Course	-	√				
h)	Any other: Computer Course	-	√				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	4	-	4	-	2 Yard	Walking
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A.	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						N.A.	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						N.A.	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				N.A.	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				N.A.	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
l)	Indoor games	√		-	
m)	Outdoor games	√		-	
n)	Music	√		-	
o)	Television	-		-	
p)	Picnic	-		-	
q)	Outings	-		-	
r)	Cultural Programme	-		-	
s)	Yoga	-		-	
t)	Debates	-		-	
u)	Radio	-		-	
v)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				N.A.	
If Yes, Opening timing or day				N.A.	
What types of books provide for Children				N.A.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		N.A.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Child welfare committee, I.C.P.S. Control Board
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		One
b) Details of Training Programmes		Placement Officer has given a talk on care and protection (JJ Act)
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		On JJ Act, ICPS Scale by NIPCCD in 2009
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		N.A.
Suggestion of CWC/Inspection Committee		They found everything in place
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>UP/07/ NGO/113</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Devraj Gramin Gramodhyog Sewa Sansthan	
Address for Communication	Rattu Chak Veyana, Sagarpali Ballia	
Telephone (with STD code)	05498-222784	
Fax	-	
Email ID	Royaltower.prashant@gmail.com	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Prashant Pandey 09919709299	
Vision of NGO	Social Work	
Mission of NGO	Make Self Depend to Helpless and Homeless Children	
Key Objectives	Operation of Balgreh in Ballia U.P.	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1996	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
-	726/96-97	Azamghar
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	N.A.	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	0178/10, Dated : 15 June 2010	
If No, give reasons thereof	-	
Number of Governing Body Members	11	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	16	
Total No. of Professional Staff		
a) Male	9	
b) Female	7	
Total number of		
a) Full Time	12	

b) Part time Staff		4		
<b>FINANCIAL MANAGEMENT</b>				
Annual Budget of Organization for last three years (In Lakhs)				
2009-10		2008-09	2007-08	
-		-	-	
Sources of Funding of the NGO (Cash/kind/other)				
International	National	State Govt.	Community Support	
-	-	-	√	
			Donation	
			-	
			Any Other (Please specify) Membership Fee's	
			-	
<b>DOCUMENTATION</b>				
Which of the following documents/communication material are maintained at the organizational level		Annual report, Brochure and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		-		
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		Devraj Gramin Gramodhyog Sewa Sansthan		
Contact Details				
Name of Superintendent/Secretary		Prashant Pandey 09919709299		
Address		Rattu Chak Veyana, Sagarpali Ballia		
Phone		05498-222784		
Fax		-		
Email		royaltower.prashant@gmail.com		
<b>Type of Institution</b>		<b>Children Home</b>		
Run by		NGO		
Year of Establishment of the Home		1996		
Supported by		-		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		50		
b) Present Strength		32		
Number of Children lodged in the home having families residing in the same State/UT		26		
Reasons for staying in the home in case of children having families (provide details)		Helpless & Homeless Children		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	-	-
c)	10-15 years	-	21	21
d)	15-18 years	-	11	11
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total

		Girls	Boys		
a)	0-4 month	-	18	18	
b)	4-6 month	-	2	2	
c)	6-12 month	-	12	12	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
e)	3-4 years	-	-	-	
f)	4-5 years	-	-	-	
g)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	3	3	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Entertainment, Study, Game and Computer Training		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960			Yes		
Any other registration			N.A.		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	Yes			
If Yes, Please Specify the Facilities provided			Children, Study, Entertainment, Game & Neat and Clean Atmosphere		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	30*20	-	-
b)	Classrooms	1	10*25	50	-
c)	Sick room/ First Aid Room	1	8*10	-	-
d)	Kitchen	1	10*10	-	-
e)	Dinning Hall	1	20*10	-	-
f)	Recreation room	1	25*10	-	32
g)	Library	1	20*10	-	-
h)	Counseling & Guidance room	1	10*10	-	-
i)	Office rooms	1	15*10	-	-
j)	Workshops	-	-	-	-

k)	Separate Bathrooms for boys and girls	4	4*4	-	-
l)	Separate Latrines for boys and girls	3	4*4	-	-
m)	Store room	1	10*10	-	-
n)	Play Ground	1	40*100	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				8500	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M.A.	15,000	3 Years
b)	Social Welfare Officer	1	1	M.A.	10,000	1 Year
c)	Counselor	1	1	B.A.	10,000	2 Years
d)	Case Worker	1	1	B.A.	10,000	2 Years
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	5,000	1 Year
f)	Paramedical Staff	1	1	B.A.	4,000	1 Year
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	1	1	B.Sc.	4,000	1 Year
i)	Store-keeper cum Accountant	1	1	Inter	4,000	2 Years
j)	Music Teacher	1	1	B. Ed.	4,000	-
k)	Sports/ Yoga Teacher	1	1	B. Ed.	4,000	2 Years
l)	Driver	-	-	-	-	-
m)	Cook	2	2	10 <sup>th</sup>	4,000	2 Years
n)	House Aunty	1	1	B.A.	8,000	2 Years
o)	Security Guard	1	1	Inter	4,000	-
p)	Helper	1	1	High School	3,000	2 Years
q)	Sweeper	1	1	8 <sup>th</sup>	-	2 Years
r)	Any other (Please Specify)	-	-	-	-	-
Total		16	16	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	10 to 18 years Children
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-



Maintenance of Registers/Record Maintenance			
S. No.	Details of Register		Please tick $\checkmark$
a)	Admission and discharge register		$\checkmark$
b)	Individual Care Plan		$\checkmark$
c)	Supervision register		$\checkmark$
d)	Medical file or medical report		$\checkmark$
e)	Nutrition diet file		$\checkmark$
f)	Stock Register		$\checkmark$
g)	Visitor's book		$\checkmark$
h)	Case file		$\checkmark$
i)	Inquiry report file		$\checkmark$
j)	Stock register		$\checkmark$
k)	Any other(Please Specify) $\rightarrow$ Attendance Register		$\checkmark$
Minimum Standard of Care			
MEDICAL CARE			
What are the health related services available for Children			Yes
Does the home have a Medical Care Unit for health check-up of Children			Yes
If yes, Opening of day, time and duration of MCU			7 Nov. 2008
Frequency of Doctor's visit			-
Whether any trained Staff for first-aid			Yes
Referral of Cases			
a)	Govt. Hospital		$\checkmark$
b)	Dispensary		-
c)	Any other		-
How many children are suffering from communicable diseases and HIV/AIDS			None
Any specialized services are provided for them			No
If yes, Please provide in details			N.A.
Whether ambulance facility is available for patients			No
Any other Facilities			-
NUTRITION AND DIET SCALE			
Whether any menu chart followed by homes			Yes
How many times meals are provided in a day			Two
What types of special diet is provided for sick infant or children			-
How many cooks are there			Two
Whether children are helping at the time of cooking in any way			Yes
Whether any Nutrition and Child Development Officer is there			Yes
CLOTHING AND BEDDING			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	-
b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	1	-

d)	Under garments	1	-
e)	Towel	1	-
f)	Durry	1	-
g)	Blanket	1	-
h)	Pillow	1	-
i)	Shoes/Chappal	1	-
j)	Tooth powder/paste	1	-
k)	Soap	1	-
l)	Oil	1	-
m)	Utensils (Plate and Glass)	1 Set	-

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	
c)	Primary	√	
d)	Secondary	-	√
e)	Higher	-	√
f)	Non-formal classes	√	-
g)	Private coaching	√	-
h)	Bridge Course	-	√
i)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	6	6	-	Private	1 km	By Bus
b)	Primary	17	17	-	Private	1 km	By Bus
c)	Secondary	12	12	-	Private	1 km	By Bus
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	8	8	-	Private	1 km	By Bus
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month 300

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	13	-	13	6 Months
d)	Jute bags and 'moti' work	10	-	10	6 Months
e)	Painting and Mehendi	10	-	10	6 Months
f)	Books binding	8	-	8	6 Months

g)	Printing	6	-	6	6 Months
h)	Auto Rickshaw/motor cycle/ mobile repairing	10	-	10	3 Months
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				B.A., I.T.I	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	-		-	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Monthly	
f)	Outings	-		-	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Monthly	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				-	
What types of books provide for Children				Comics, Magazines	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	

g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		Food and Clothes
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		N.A.
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		Three
b) Details of Training Programmes		Vocational Training
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		U.P. Samaj Kalyan Department, Lucknow
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Sant. G. Sewa Sansthan ★ Om Shiv Seva Sansthan
Suggestion of CWC/Inspection Committee		Increase Facilities of Institution
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>UP/08/ NGO/114</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Uma Mahila Ttthan Samiti Mishrikh Tirath, Sitapur	
Address for Communication	Bal Greh (Balak) Awashi, Krisna Nagar, Sitapur	
Telephone (with STD code)	09415150993, 09696104896	
Fax	-	
Email ID	balgrehbalak@rediffmail.com	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	-	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	Sitapur	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	01-12-2008	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Act 2000 Sec 34(3)	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
01-06-2009	0165/2009	Sitapur
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	01-06-2009	
If No, give reasons thereof	-	
Number of Governing Body Members	-	
Physical Assets of the Organization	Building, Furniture and Other fixed Assets	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	14	
Total No. of Professional Staff		
a) Male	11	
b) Female	8	
Total number of		

a) Full Time						18
b) Part time Staff						-
<b>FINANCIAL MANAGEMENT</b>						
Annual Budget of Organization for last three years (In Lakhs)						
2009-10		2008-09		2007-08		
40,36,960.00		10,49,308.00		16,343.00		
Sources of Funding of the NGO (Cash/kind/other)						
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Membership Fee's	
-	-	-	-	Cash	-	
<b>DOCUMENTATION</b>						
Which of the following documents/communication material are maintained at the organizational level				Annual report and Brochure		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>						
<b>Name of Child Care Institution</b>				Bal Greh (Balak) Awashi		
Contact Details						
Name of Superintendent/Secretary				Rachna Vaish		
Address				Hardoi Road, Sitapur		
Phone				09696104896		
Fax				-		
Email				balgrehbalak@rediffmail.com		
<b>Type of Institution</b>				<b>Children Home</b>		
Run by				NGO (Uma Mahila Utthan Samiti)		
Year of Establishment of the Home				2008		
Supported by				MWCD		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>		
Number of inmates						
Capacity				50		
Present Strength				35		
Number of Children lodged in the home having families residing in the same State/UT				-		
Reasons for staying in the home in case of children having families (provide details)				-		
Age breakup of children						
S.No.	Age	Number of Children		Total		
		Girls	Boys			
a)	0-5 years	-	-	-		
b)	5-10 years	-	-	-		
c)	10-15 years	-	16	16		
d)	15-18 years	-	5	5		
Details of Stay of Children in the home						
S.No.	Duration	Number of Children		Total		
		Girls	Boys			

a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	16	16
d)	1-2 years	-	5	5
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

Chair, table, Cloth and Other daily uses items, Outdoor games and Computer etc

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960

No

Any other registration

No

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board

-

b) Child Welfare Committee

√

If Yes, Please Specify the Facilities provided

Care and Protection, Food, Game etc.

**INFRASTRUCTURE**

Infrastructure available

a) Owned

-

b) Rented

√

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	-	-	-
b)	Classrooms	2	-	-	-
c)	Sick room/ First Aid Room	2	-	-	-
d)	Kitchen	3	-	-	-
e)	Dinning Hall	2	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	-	-	-	-
h)	Counseling & Guidance room	2	-	-	-
i)	Office rooms	1	-	-	-
j)	Workshops	1	-	-	-
k)	Separate Bathrooms for boys and girls	7	-	-	-

l)	Separate Latrines for boys and girls	7	-	-	-
m)	Store room	1	-	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				1500	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Post Graduate	15,000	2 Years
b)	Social Welfare Officer	1	1	Post Graduate	10,000	9 Months
c)	Counselor	1	1	Post Graduate	10,000	9 Months
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	8,000	9 Months
f)	Paramedical Staff	1	1	Diploma	5,000	9 Months
g)	Educator	1	1	Graduate	4,000	9 Months
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	1	1	Post Graduate	8,000	2 Years
j)	Music Teacher	1	1	Inter	4,000	9 Months
k)	Sports/ Yoga Teacher	1	1	Inter	4,000	9 Months
l)	Driver	1	1	-	4,000	9 Months
m)	Cook	1	1	8 <sup>th</sup>	4,000	9 Months
n)	House Aunty	2	2	Graduate	8,000	9 Months
o)	Security Guard	-	-	-	-	-
p)	Helper	1	1	8 <sup>th</sup>	4,000	9 Months
q)	Sweeper	1	1	-	2,000	9 Months
r)	Any other (Please Specify) → Grander	1	1	8 <sup>th</sup>	2,000	9 Months
Total		16	16	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Juvenile Justice Act- 2000/2006
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Yes
Maintenance of Registers/Record Maintenance	
S. No.	Details of Register
	Please tick √



a)	Admission and discharge register	√
b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify) → Attendance Register	√

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	Twice in a day
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	Yes
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Two
What types of special diet is provided for sick infant or children	Milk, Meat, Egg etc.
How many cooks are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	Yes

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	-	-
d)	Under garments	2	Year
e)	Towel	2	Year

f)	Durry	1	Year
g)	Blanket	1	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	2	Year
j)	Tooth powder/paste	2	Month
k)	Soap	6	Year
l)	Oil	200 ml	Month
m)	Utensils (Plate and Glass)	2 Set	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	-	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	2	-	2	1 Year
b)	Beauty Culture	-	-	-	-
c)	Computer	10	-	10	6 Months
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	5	-	5	3 Months
f)	Books binding	15	-	15	1 Month
g)	Printing	3	-	3	1 Year
h)	Auto Rickshaw/motor	-	-	-	-

	cycle/ mobile repairing				
i)	Candle making	20	-	20	1 Year
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	10	-	10	1 Year
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Per week	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Every Three Month	
f)	Outings	√		Daily	
g)	Cultural Programme	√		-	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	

h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		Yes
If Yes,		
a) Number of Training Programmes organized		Two
b) Details of Training Programmes		Child Development, NIPCCD Luknow (U.P.), (22-26 Feb. 2010) JJ Act Care and Protection Act 2006 and ICPS, NIPCCD Lucknow (U.P.), (18-19 March, 2010)
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ NIPCCD Lucknow (U.P.)

<b>UP/09/ NGO/115</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Swajan Shikshan Sansthan	
Address for Communication	E-131, Kurmanchal Nagar, Lucknow	
Telephone (with STD code)	0522-4104450	
Fax	0522-4104450	
Email ID	Swajan.ngo@gmail.com	
Website of Organization	<a href="http://www.swajanngo.org">www.swajanngo.org</a>	
Type of Child Care Institution being run	Kasturba Gandhi Avasiya Vidyalaya, Oldage Home, Short Stay Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Suresh Pratap Singh 09415419124	
Vision of NGO	Main streamed line towards based child of our nation	
Mission of NGO	Education, Development and Child Development	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children, Women and Adolescent	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	27-11-1995	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	Under Societies Act, XXI- 1860	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
27-11-1995	1771	Lucknow
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	136550421	
Any other Registration/ Recognition with Central / State Govt.:	12A, 80G, etc	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	1908/2008, dated: 11-02-2008, Reg. act 2006, Amendment Act etc	
If No, give reasons thereof	N.A.	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	150	
Total No. of Professional Staff		
a) Male	70	
b) Female	75	

Total number of					
a) Full Time				132	
b) Part time Staff				13	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
119,77,542		175,56,008		76,02,102	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Membership Fee's
-	-	√	-	-	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual report, Brochure, Leaflet, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				Yes	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Balgrim	
Contact Details					
Name of Superintendent/Secretary				Suresh Pratap	
Address				Rajput Colony, Near C.M. Office, Bhinga, Sravasti	
Phone				0522-4104450	
Fax				0522-4104450	
Email				Swajan.ngo@gmail.com	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO (Swajan Shikhsan Sansthan)	
Year of Establishment of the Home				2008	
Supported by				MWCD and State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
Capacity				100	
Present Strength				85	
Number of Children lodged in the home having families residing in the same State/UT				5	
Reasons for staying in the home in case of children having families (provide details)				As parents are not able to earn for livelihood	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	1	4	5	
b)	5-10 years	3	12	15	
c)	10-15 years	17	43	1660	
d)	15-18 years	-	5	5	
Details of Stay of Children in the home					

S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	1	2	3
b)	4-6 month	-	10	10
c)	6-12 month	3	30	38
d)	1-2 years	17	22	39
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	2	4	6
b)	Autism	-	-	-
c)	Physically challenged	-	7	7
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home As required time to time

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960 Yes

Any other registration FCRA

Whether the Institution is certified as Fit Institution by

a) Juvenile Justice Board -

b) Child Welfare Committee ✓

If Yes, Please Specify the Facilities provided

All fundamental facilities are available

**INFRASTRUCTURE**

Infrastructure available

a) Owned -

b) Rented ✓

c) Lease -

d) Donated -

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	25*20	As per norms	85
b)	Classrooms	5	15*15	-	-
c)	Sick room/ First Aid Room	-	-	-	-
d)	Kitchen	1	8*8	-	-
e)	Dinning Hall	1	12*20	-	-
f)	Recreation room	1	10*10	-	-
g)	Library	1	15*20	-	-
h)	Counseling & Guidance room	1	10*10	-	-
i)	Office rooms	1	10*10	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for	2	6*6	-	-

	boys and girls				
l)	Separate Latrines for boys and girls	2	6*6	-	-
m)	Store room	1	6*6	-	-
n)	Play Ground	1	20*30	-	-
o)	Vocational Training Centre	1	10*10	-	-
Total area of the Campus (Sq. ft.)				3000	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### **MANPOWER OF CHILDREN HOME**

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	-	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	-	-	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	-	-	-	-
s)	Any other (Please Specify)	-	-	-	-	-
	Total	-	-	-	-	-

#### **CRITERIA FOR ADMISSION IN SHELTER HOMES**

Whether the organization is following any criteria for admission of children in Homes	No
If Yes Please mention	N.A.
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	History of families and causes.
Maintenance of Registers/Record Maintenance	



S. No.	Details of Register	Please tick $\checkmark$
a)	Admission and discharge register	$\checkmark$
b)	Individual Care Plan	$\checkmark$
c)	Supervision register	$\checkmark$
d)	Medical file or medical report	$\checkmark$
e)	Nutrition diet file	$\checkmark$
f)	Stock Register	$\checkmark$
g)	Visitor's book	$\checkmark$
h)	Case file	$\checkmark$
i)	Inquiry report file	-
j)	Stock register	$\checkmark$
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Weekly visit of Doctor
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	N.A.
Frequency of Doctor's visit	Weekly
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	$\checkmark$
b) Dispensary	$\checkmark$
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	Yes
Any other Facilities	-

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Three
What types of special diet is provided for sick infant or children	As per direction of Doctor
How many cooks are there	Two
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	Yes

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Year
b)	Winter Clothing(Jersey)	1	Year
c)	School Uniform	2	Year
d)	Under garments	4	Year

e)	Towel	1	Year
f)	Durry	1	Year
g)	Blanket	2	Year
h)	Pillow	1	Year
i)	Shoes/Chappal	1+1	Year
j)	Tooth powder/paste	1	Twice in a month
k)	Soap	1	Twice in a month
l)	Oil	1	Twice in a month
m)	Utensils (Plate and Glass)	1	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	
c)	Primary	√	-
d)	Secondary	-	√
e)	Higher	-	√
f)	Non-formal classes	-	√
g)	Private coaching	-	√
h)	Bridge Course	-	√
i)	Any other: Computer Course	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	10	7	3	Govt.	½ km	Walking
b)	Primary	9	8	1	Govt.	½ km	Walking
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students Yes

If Yes, then how much per child month Rs. 50/-

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required N.A.

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	3	7	10	6 Months
b)	Beauty Culture	-	5	5	3 Months
c)	Computer	-	-	-	
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	1	5	6	3 Months
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-

h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				No	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	√		Monthly	
g)	Cultural Programme	-		-	
h)	Yoga	√		Daily	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Daily, 10:00 a.m. to 7:00 p.m.	
What types of books provide for Children				Learning and skill development	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms			Yes	

	(at least one bathroom for ten children)	
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		General Guidance
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Rapid checking through supervisory staff of organization
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		By differences govt. departments
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		In disaster management and with your organization at lucknow centre
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		★ Satisfactory comments
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Women and Child Development (Needs and Requirements)

<b>UP/10/ NGO/116</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Lalita Bhartiya Khadi Gramodhoga Sansthan	
Address for Communication	Vill Sheetal Purwa, BKT, Lucknow	
Telephone (with STD code)	09936210059	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Shishu Greh	
Whether run by	NGO	
Name and contact of Chief Functionary	Rajeev Singer	
Vision of NGO	-	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	-	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
30-03-1999	3413	Lucknow
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	No	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	-	
If No, give reasons thereof	-	
Number of Governing Body Members	0	
Physical Assets of the Organization	Nil	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	10	
Total No. of Professional Staff		
a) Male	6	
b) Female	4	
Total number of		
a) Full Time	10	
b) Part time Staff	-	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
6,21,042		2,38,200		157,523	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify)
-	-	-	Cash	Cash	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Bal Grah	
Contact Details					
Name of Superintendent/Secretary				Nisha Srivastava	
Address				Vishnu Puri Colony, Hazur Pur Road, Behraich	
Phone				-	
Fax				-	
Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO	
Year of Establishment of the Home				2008	
Supported by				-	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
Capacity				50	
Present Strength				25	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	25	25	
c)	10-15 years	-	-	-	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	
b)	4-6 month	-	-	-	

c)	6-12 month	-	-	-	
d)	1-2 years	-	-	-	
e)	2-3 years	-	-	-	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	25	25	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home		-			
Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960		No			
Any other registration		No			
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided		-			
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	-			
b)	Rented	√			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	-	-	-
b)	Classrooms	1	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	-	-	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	-	-	-	-
l)	Separate Latrines for boys and girls	1	-	-	-
m)	Store room	1	-	-	-

n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				2500	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	-	1	M.S.W.	15,000	2009
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	1	M.A.	10,000	2009
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	1	M.B.B.S.	8,000	2009
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	1	Inter	10,000	2009
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	1	B.Com.	10,000	2009
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	-	2	-	3,000 2,000	2009
n)	House Aunty	-	1	B.Com.	2,000	2009
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	-	1	-	2,000	2009
r)	Any other (Please Specify) Art Teacher	-	1	Diploma	4,000	2009
Total		-	10	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	-
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

#### Maintenance of Registers/Record Maintenance

S.No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>



b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Medical Aid
Does the home have a Medical Care Unit for health check-up of Children	Yes
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	Alternate Day
Whether any trained Staff for first-aid	Yes
Referral of Cases	
a) Govt. Hospital	√
b) Dispensary	√
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	No

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	Yes
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	-
How many cooks are there	Two
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	2	Year
b)	Winter Clothing(Jersey)	2	Year
c)	School Uniform	2	Year
d)	Under garments	4	Year
e)	Towel	2	Year
f)	Durry	1	Year

g)	Blanket	2	Year
h)	Pillow	2	Year
i)	Shoes/Chappal	4	Year
j)	Tooth powder/paste	2	Month
k)	Soap	1	Month
l)	Oil	1	Month
m)	Utensils (Plate and Glass)	1	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	
c)	Primary	-	√
d)	Secondary	-	√
e)	Higher	-	√
f)	Non-formal classes	-	√
g)	Private coaching	-	√
h)	Bridge Course	-	√
i)	Any other:	-	√

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children -

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children No

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-

i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				No	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	-		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	-		-	
g)	Cultural Programme	√		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	√		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				Whole day	
What types of books provide for Children				All types of books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			-	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			-	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		No
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>UP/11/ NGO/117</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Buddh Mahila Samiti	
Address for Communication	New Bheem Nagar, Garh Road, Hapur-245101, Dist. Ghaziabad, U.P.	
Telephone (with STD code)	-	
Fax	-	
Email ID	-	
Website of Organization	-	
Type of Child Care Institution being run	Children Home	
Whether run by	NGO	
Name and contact of Chief Functionary	Sukhbir Singh Bauddh	
Vision of NGO	Social Work	
Mission of NGO	-	
Key Objectives	-	
Major Activities	-	
Target group/ Stakeholders	Women and Children	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1992	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
06-02-1992	22732 M	Hapur
Whether the organization is registered under FCRA	No	
If Yes, FCRA No,	-	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
If Yes, give details of registration	-	
If No, give reasons thereof	-	
Number of Governing Body Members	7	
Physical Assets of the Organization	-	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	7	
Total No. of Professional Staff		
a) Male	1	
b) Female	2	
Total number of		
a) Full Time	1	
b) Part time Staff	2	

<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years (In Lakhs)					
2009-10		2008-09		2007-08	
7.5		6.0		4.5	
Sources of Funding of the NGO (Cash/kind/other)					
International	National	State Govt.	Community Support	Donation	Any Other (Please specify) Contribution by members
-	-	Kind	Cash	Cash	√
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Audit report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Buddh Bal Greh	
Contact Details					
Name of Superintendent/Secretary				Sukhbir Singh Bauddh	
Address				New Bheem Nagar, Hapur	
Phone				08057746852	
Fax				-	
Email				-	
<b>Type of Institution</b>				<b>Children Home</b>	
Run by				NGO (Buddh Mahila Samiti)	
Year of Establishment of the Home				2008	
Supported by				Public Donation	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
Capacity				50	
Present Strength				6	
Number of Children lodged in the home having families residing in the same State/UT				-	
Reasons for staying in the home in case of children having families (provide details)				-	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	-	-	-	
b)	5-10 years	-	-	-	
c)	10-15 years	-	6	6	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	-	-	

b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	6	6
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-
h)	More than 5 Years	-	-	-

Number of "Children with special needs" in the home

S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-

What are the facilities and support services provided for the children staying in Home

Rooms, Bathrooms, Library etc.

Whether Institution has been registered under The Orphanage And Other Charitable Homes (Supervision and Control) Act-1960

No

Any other registration

N.A.

Whether the Institution is certified as Fit Institution by

N.A.

a) Juvenile Justice Board

-

b) Child Welfare Committee

-

If Yes, Please Specify the Facilities provided

-

**INFRASTRUCTURE**

Infrastructure available

a) Owned

-

b) Rented

√

c) Lease

-

d) Donated

-

Details of Accommodation for Children and Institutional Infrastructure

S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	2	288	-	-
b)	Classrooms	2	577	-	-
c)	Sick room/ First Aid Room	1	288	-	-
d)	Kitchen	1	120	-	-
e)	Dinning Hall	1	420	-	-
f)	Recreation room	-	-	-	-
g)	Library	1	240	-	-
h)	Counseling & Guidance room	-	-	-	-
i)	Office rooms	1	288	-	-
j)	Workshops	-	-	-	-
k)	Separate Bathrooms for boys and girls	2+1	64+39	-	-
l)	Separate Latrines for boys and girls	2+1	32+24	-	-

m)	Store room	2	96	-	-
n)	Play Ground	-	-	-	-
o)	Vocational Training Centre	-	-	-	-
Total area of the Campus (Sq. ft.)				3630	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	-	-	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	2,000	2009
f)	Paramedical Staff	-	-	-	-	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant	-	-	-	-	-
j)	Music Teacher	-	-	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	1	-	-	-
n)	House Aunty	1	1	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	-	-	-	-	-
q)	Sweeper	1	1	-	-	-
r)	Any other (Please Specify) Art Teacher	-	-	-	-	-
Total		5	5	-	-	-

#### CRITERIA FOR ADMISSION IN SHELTER HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	As per direction of State Govt.
Whether the organization maintains any specific Proforma for recording details of Information of every child	No
If Yes, what kind of information you have collected from children	N.A.

#### Maintenance of Registers/Record Maintenance

S.No.	Details of Register	Please tick <input type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>



b)	Individual Care Plan	-
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	-
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	-
i)	Inquiry report file	-
j)	Stock register	-
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	-
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	-
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	No
Referral of Cases	
a) Govt. Hospital	-
b) Dispensary	-
c) Any other	-
How many children are suffering from communicable diseases and HIV/AIDS	None
Any specialized services are provided for them	No
If yes, Please provide in details	N.A.
Whether ambulance facility is available for patients	No
Any other Facilities	No

#### NUTRITION AND DIET SCALE

Whether any menu chart followed by homes	No
How many times meals are provided in a day	Four
What types of special diet is provided for sick infant or children	As advised by the doctor
How many cooks are there	One
Whether children are helping at the time of cooking in any way	No
Whether any Nutrition and Child Development Officer is there	No

#### CLOTHING AND BEDDING

How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	Year
b)	Winter Clothing(Jersey)	2	Year
c)	School Uniform	2	2 Year
d)	Under garments	4	Year
e)	Towel	2	Year
f)	Durry	1	Year
g)	Blanket	1	Year

h)	Pillow		1		Year		
i)	Shoes/Chappal		1+1		Year		
j)	Tooth powder/paste		1		Month		
k)	Soap		1		Month		
l)	Oil		1		Month		
m)	Utensils (Plate and Glass)		As per requirement				
<b>EDUCATION</b>							
Whether educational facilities are available for children					Yes		
Are any of the educational facilities available within the institution							
a)	Formal School on Premises		Yes		No		
b)	Pre-school		-		√		
c)	Primary		√		-		
d)	Secondary		-		√		
e)	Higher		-		√		
f)	Non-formal classes		-		√		
g)	Private coaching		-		√		
h)	Bridge Course		-		√		
i)	Any other:		-		√		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students					Yes		
If Yes, then how much per child month					Rs. 200 /-		
Whether the educational facilities are adequate for children					Yes		
If No, what are the other facilities required					-		
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children					No		
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	-	-	-		

j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				N.A.	
If Yes, details of qualification				N.A.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	-		-	
c)	Music	-		-	
d)	Television	√		Daily	
e)	Picnic	-		-	
f)	Outings	-		-	
g)	Cultural Programme	-		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				8:00 a.m. to 8:00 p.m.	
What types of books provide for Children				Social, Political, Stories, Character Development, Historical Books etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			No	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)			Yes	
h)	Sufficient space for washing			Yes	

i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		No
What types of Co-operation and Co-ordination received for homes		N.A.
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Nil
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		N.A.
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		N.A.
b) Details of Training Programmes		N.A.
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		-
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

*West Bengal*

<b>WB/01/GO/118</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Subhayan</b>	
Contact Details				
Name of Superintendent/Secretary			Santance Chowdhury	
Address			Hossempur, P.O. Beltalapak, District South Dinajpur	
Phone			03522-255053	
Fax			-	
Email			subhayan@email.com	
<b>Type of Institution</b>			<b>Children Home and Observation Home</b>	
Run by			State Government (Department of Women and Child Development and Social Welfare)	
Year of Establishment of the Home			1991	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			100	
b) Present Strength			99	
Number of Children lodged in the home having families residing in the same State/UT			-	
Reasons for staying in the home in case of children having families (provide details)			-	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	0	0
b)	5-10 years	-	22	22
c)	10-15 years	-	42	42
d)	15-18 years	-	35	35
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	5	5
b)	4-6 month	-	45	45
c)	6-12 month	-	16	16
d)	1-2 years	-	8	8
e)	2-3 years	-	11	11
f)	3-4 years	-	6	6
g)	4-5 years	-	8	8
h)	More than 5 Years	-	-	-
Number of "Children with special needs" in the home				

S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	-	-	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			N.A.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			-		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	√			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			Education, Medical, Recreational Facilities are provided		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	7	128 * 60	48	72
b)	Classrooms	1	20 * 15	60	72
c)	Sick room/ First Aid Room	4	10 * 5 20 * 15	-	-
d)	Kitchen	2	20 * 20	-	-
e)	Dinning Hall	2	40 * 30	-	-
f)	Recreation room	1	40 * 30	-	-
g)	Library	1	20 * 15	-	-
h)	Counselling & Guidance room	1	20 * 14	-	-
i)	Office rooms	2	40 * 20 30 * 20	-	-
j)	Workshops	0	-	-	-
k)	Separate Bathrooms for boys and girls	10	5 * 4	-	-
l)	Separate Latrines for boys and girls	10	5 * 4	-	-
m)	Store room	3	15 * 12	-	-
n)	Play Ground	1	100 * 80	-	-
o)	Vocational Training Centre	-	-	-	-

Total area of the Campus (Sq. ft.)					-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light					Yes	
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	B.A.	24,796	-
b)	Social Welfare Officer	2	0	-	-	-
c)	Counselor	0	0	-	-	-
d)	Case Worker	3	3	M.S.W.-1, B.A. -2	23,940 19,092 18,286	-
e)	Doctor (Part time or Full time)	0	0	-	-	-
f)	Paramedical Staff	0	0	-	-	-
g)	Educator	0	0	-	-	-
h)	Vocational Instructor	1	1	B.Com.	19,916	-
i)	Store-keeper cum Accountant/ LDC	1	1	H.S.	25,036	-
j)	Music Teacher	0	0	-	-	-
k)	Sports/ Yoga Teacher	0	0	-	-	-
l)	Driver	0	0	-	-	-
m)	Cook	1	1	M.P.	15,810	-
n)	House Aunty	1	1	M.P.	13,625	-
o)	Security Guard	1	1	8 <sup>th</sup>	13,691	-
p)	Helper	0	0	-	-	-
q)	Sweeper	1	1	4 <sup>th</sup>	12,044	-
r)	Any other Typist Peon	1 1	1 1	M.P. 8 <sup>th</sup>	18,810 14,986	
	Total	14	12			
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Through C.W.C. and Social Welfare Department through Director	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					-	
Maintenance of Registers/Record Maintenance						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	
a)	Admission and discharge register				<input checked="" type="checkbox"/>	



b)	Individual Care Plan	√	
c)	Supervision register	√	
d)	Medical file or medical report	√	
e)	Nutrition diet file	-	
f)	Stock Register	√	
g)	Visitor's book	√	
h)	Case file	√	
i)	Inquiry report file	√	
j)	Stock register	√	
k)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		-	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		None	
Any specialized services are provided for such children		Yes	
If yes, Please provide in details		Doctors visit occasionally	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		Special bread, milk, egg and fruits	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	-
b)	Winter Clothing(Jersey)	1	-
c)	School Uniform	1	-
d)	Under garments	1	-
e)	Towel	1	-
f)	Durry	-	-

g)	Blanket		1		-		
h)	Pillow		1		-		
i)	Shoes/ Chappal		2		-		
j)	Tooth powder/paste		-		-		
k)	Soap		-		-		
l)	Oil		-		-		
m)	Utensils (Plate and Glass)		-		-		
<b>EDUCATION</b>							
Whether educational facilities are available for children				Yes			
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises		Yes		No		
a)	Pre-school		-		√		
b)	Primary		-		√		
c)	Secondary		-		√		
d)	Higher		-		√		
e)	Non-formal classes		-		√		
f)	Private coaching		√		-		
g)	Bridge Course		-		√		
h)	Any other		-		-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	30	30	-	Govt.	1 km	By Walk
c)	Secondary	40	40	-	Govt.	3 km	By Walk
d)	Higher	2	2	-	Govt.	4 km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						N.A.	
Whether the educational facilities are adequate for children						No	
If No, what are the other facilities required						Enhancement of private coaching (teachers) are required	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						No	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	-	-	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		

h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				No	
If Yes, details of qualification				N.A.	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				N.A.	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	-		-	
d)	Television	√		-	
e)	Picnic	√		-	
f)	Outings	√		-	
g)	Cultural Programme	√		-	
h)	Yoga	-		-	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other (Please Specify)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				10:00 a.m. to 7:00 p.m.	
What types of books provide for Children				Stories, Science, Comics, Books etc	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets			Yes	

	(at least one latrine for seven children)	
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Constant Vigilance
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Visit of Chairperson of Human Right Commission
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		Yes
If Yes, a) Number of Training Programmes organized		Three
b) Details of Training Programmes		Capacity Building
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Capacity Building and Training of JJ Act
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ Jay Prakash Institute ★ Prajjak
Suggestion of CWC/Inspection Committee		★ Keeping in touch with children
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		-

<b>WB/02/GO/119</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>			<b>Vidyanagar Balika Bhawan, Midnapore</b>	
Contact Details				
Name of Superintendent/Secretary			Bharat Ghosh	
Address			VBB Home, Gope, Midnapore (W)	
Phone			03222-275239/ 9477415585	
Fax			03222-275239	
Email			-	
<b>Type of Institution</b>			<b>Observation Home, Children Home and Aftercare Home (Girls)</b>	
Run by			State Government (Govt. of West Bengal)	
Year of Establishment of the Home			1962	
Supported by			State Government	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>			<b>Yes</b>	
Number of inmates				
a) Capacity			425	
b) Present Strength			182	
Number of Children lodged in the home having families residing in the same State/UT			91	
Reasons for staying in the home in case of children having families (provide details)			The Socio-economic condition is very poor and some of inmates are	
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	3	-	3
b)	5-10 years	50	-	50
c)	10-15 years	107	-	107
d)	15-18 years	22	-	22
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	-	-
b)	4-6 month	-	-	-
c)	6-12 month	-	-	-
d)	1-2 years	-	-	-
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-
g)	4-5 years	-	-	-

i)	More than 5 Years	182	-	182	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	4	-	4	
b)	Autism	-	-	-	
c)	Physically challenged	2	-	2	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Education, Vocational Training, Rehabilitation through job etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	-			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	17	-	-	-
b)	Classrooms	11	-	-	-
c)	Sick room/ First Aid Room	1	-	-	-
d)	Kitchen	1	-	-	-
e)	Dinning Hall	1	-	-	-
f)	Recreation room	1	-	-	-
g)	Library	1	-	-	-
i)	Counselling & Guidance room	1	-	-	-
j)	Office rooms	3	-	-	-
k)	Workshops	2	-	-	-
l)	Separate Bathrooms for boys and girls	12	-	-	-
m)	Separate Latrines for boys and girls	11	-	-	-
n)	Store room	2	-	-	-
o)	Play Ground	2	-	-	-
p)	Vocational Training Centre	2	-	-	-
Total area of the Campus (Sq. ft.)				22 Acres	
Whether the dormitories, classrooms and workshops have sufficient				Yes	

ventilation and Light						
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	M. Com.	9,000 – 40,500	-
b)	Social Welfare Officer	-	-	-	-	-
c)	Counselor	-	-	-	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	-	-	-	-	-
f)	Paramedical Staff	1	1	M.P.	5,400 - 25,200	-
g)	Educator	-	-	-	-	-
h)	Vocational Instructor	-	-	-	-	-
i)	Store-keeper cum Accountant/ LDC	-	-	-	-	-
j)	Music Teacher	1	1	-	-	-
k)	Sports/ Yoga Teacher	-	-	-	-	-
l)	Driver	1	1	8 <sup>th</sup>	7,100 - 37,600	-
m)	Cook	3	-	4 <sup>th</sup>	-	-
n)	House Aunty	-	-	-	-	-
o)	Security Guard	-	-	-	-	-
p)	Helper	9	8	4 <sup>th</sup>	5,400 - 25,200	-
q)	Sweeper	4	3	4 <sup>th</sup>	4,900 – 16,200	-
r)	Any other	-	-	-	-	-
	Total	20	15	-	-	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					No	
If Yes Please mention					-	
Whether the organization maintains any specific Proforma for recording details of Information of every child					Yes	
If Yes, what kind of information you have collected from children					Case History, Weight, Medical Information	
Maintenance of Registers/Record Maintenance						
S. No.	Details of Register				Please tick <input checked="" type="checkbox"/>	

a)	Admission and discharge register	√	
b)	Individual Care Plan	-	
c)	Supervision register	-	
d)	Medical file or medical report	√	
e)	Nutrition diet file	√	
f)	Stock Register	√	
g)	Visitor's book	√	
i)	Case file	√	
j)	Inquiry report file	√	
k)	Stock register	√	
l)	Any other(Please Specify)	-	
<b>Minimum Standard of Care</b>			
<b>MEDICAL CARE</b>			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Once in a week	
Whether any trained Staff for first-aid		No	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		No	
Any specialized services are provided for such children		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		No	
Any other Facilities		-	
<b>NUTRITION AND DIET SCALE</b>			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As per doctor's advice	
How many cooks are there		One fixed wage cook provided by self help group	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
<b>CLOTHING AND BEDDING</b>			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	3	Yearly
b)	Winter Clothing(Jersey)	1	Yearly
c)	School Uniform	1	Yearly
d)	Under garments	1	Yearly



e)	Towel	1	Yearly				
f)	Durry	-	-				
g)	Blanket	1	Yearly				
i)	Pillow	1	-				
j)	Shoes/ Chappal	1	-				
k)	Tooth powder/paste	1	Monthly				
l)	Soap	1	Monthly				
m)	Oil	1	Monthly				
n)	Utensils (Plate and Glass)	1	Yearly				
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes	No				
a)	Pre-school	-	√				
b)	Primary	√	-				
c)	Secondary	√	-				
d)	Higher	-	√				
e)	Non-formal classes	-	√				
f)	Private coaching	√	-				
g)	Bridge Course	-	√				
i)	Any other	-	-				
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	7	-	7	Govt.	1 km	By Walk
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate foe children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							
Whether the homes have vocational training facilities for children						Yes	
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	2	2	-		
b)	Beauty Culture	-	-	-	-		
c)	Computer	-	-	-	-		
d)	Jute bags and 'moti' work	-	-	-	-		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		

g)	Printing	-	-	-	-
i)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
j)	Candle making	-	-	-	-
k)	Pickle making	-	-	-	-
l)	Soap making	-	-	-	-
m)	Textile Designing	-	-	-	-
n)	Electrical trade	-	-	-	-
o)	Shoes making/leather craft	-	-	-	-
p)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				Male staff engaged in weaving centre	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				-	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		-	
b)	Outdoor games	√		-	
c)	Music	√		-	
d)	Television	√		-	
e)	Picnic	√		Yearly	
f)	Outings	√		Monthly	
g)	Cultural Programme	√		Monthly	
i)	Yoga	√		Monthly	
j)	Debates	-		-	
k)	Radio	-		-	
l)	Any Other (Please Specify)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				4	
What types of books provide for Children				Stories, Science, Comics, Books	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S. No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	

f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
i)	Sufficient space for washing	Yes
j)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		Rehabilitation, Restoration, Donation etc
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		N.A.
Whether any specific evaluation of the Organization/Institution has been conducted in the past		No
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		No
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		Yes
If Yes, a) Number of Training Programmes organized		Four
b) Details of Training Programmes		Awareness Campaign for proper counseling, guiding and supervising the inmates and also for the rules and regulation of JJ Act
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		Child in need of Care and Protection and Human Rights on adoption and Non- Institutional care, organized by central Adoption Resource Authority
<b>DEPT./AGENCIES/INSTITUTIONS WITH WHICH YOUR ORGANIZATION/INSTITUTION IS COLLABORATING/COORDINATING FOR VARIOUS ACTIVITIES</b>		
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ International Justice Mission ★ Child Line ★ Matri Sangh Jana Kalyan Ashram etc.
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Observation of Psychiatric Patients ★ Counseling of Inmates ★ Fields of JJ Act

<b>WB/03/GO/120</b>				
<b><u>Profile of Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		Tapoban(Unit-III), a mentally retarded home for boys under JJ Act		
Contact Details				
Name of Superintendent/Secretary		Narendra Chandra Sutradhar (Secretary)		
Address		At Taltala, P.O. Khagrabari, Dist. Cooch Behar, Pin-736116		
Phone		03582-250116, 9434191319		
Fax		03582-250116		
Email		kreda@sancharnet.org		
<b>Type of Institution</b>		<b>Special Home</b>		
Run by		NGO (Khagrabari Rural Energy Development Association – KREDA)		
Year of Establishment of the Home		01-04-2009		
Supported by		MWCD and State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		25		
b) Present Strength		23		
Number of Children lodged in the home having families residing in the same State/UT		N.A.		
Reasons for staying in the home in case of children having families (provide details)		N.A.		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	-	11	-
c)	10-15 years	-	9	-
d)	15-18 years	-	3	-
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	-	8	8
b)	4-6 month	-	3	3
c)	6-12 month	-	1	1
d)	1-2 years	-	11	11
e)	2-3 years	-	-	-
f)	3-4 years	-	-	-

g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	23	23	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Lodging, Education, Recreation, Sports & Games, Vocational Training, Proper Care, Medical Support etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	√			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	20 * 20	25	23
b)	Classrooms	1	20 * 15	25	23
c)	Sick room/ First Aid Room	1	10 * 14	25	23
d)	Kitchen	1	12 * 20	25	23
e)	Dinning Hall	1	15 * 20	25	23
f)	Recreation room	1	20 * 25	25	23
g)	Library	1	10 * 12	25	23
h)	Counselling & Guidance room	1	10 * 12	25	23
i)	Office rooms	1	12 * 15	25	23
j)	Workshops	1	12 * 15	25	23
k)	Separate Bathrooms for boys and girls	6	100	25	23
l)	Separate Latrines for boys and girls	6	100	25	23
m)	Store room	1	10 * 12	25	23
n)	Play Ground	1	2.5 Acre	25	23

o)	Vocational Training Centre	1	10 *12	25	23	
Total area of the Campus (Sq. ft.)				36,000 Sq. Ft.		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Graduate with 5 years experience	3,000.00	01-04-2009
b)	Social Welfare Officer	1	1	Graduate with 5 years experience	2,500.00	01-04-2009
c)	Counselor	1	1	Graduate with 5 years experience	2,500.00	01-04-2009
d)	Case Worker	1	1	Graduate with 3years experience	2,500.00	01-04-2009
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	3,000.00	01-04-2009
f)	Paramedical Staff	1	1	H.S. Trained	2,000.00	01-04-2009
g)	Educator	-	-	Graduate with special education	2,000.00	01-04-2009
h)	Vocational Instructor	1	1	H.S. Trained	1,800.00	01-04-2009
i)	Store-keeper cum Accountant/ LDC	1	1	B. Com.	1,500.00	01-04-2009
j)	Music Teacher	1	1	Graduate with Trained	1,500.00	01-04-2009
k)	Sports/ Yoga Teacher	1	1	Graduate with Trained	1,500.00	01-04-2009
l)	Driver	1	1	Class VIII	1,200.00	01-04-2009
m)	Cook	1	1	Class VI	1,200.00	01-04-2009
n)	House Aunty	1	1	Class VIII	1,200.00	01-04-2009
o)	Security Guard	1	1	M. P.	1,200.00	01-04-2009
p)	Helper	1	1	Class VIII	1,200.00	01-04-2009
q)	Sweeper	1	1	Class IV	1,200.00	01-04-2009
r)	Any other	-	-	-	-	-
	Total	16	16	-	30,500.00	-
<b>CRITERIA FOR ADMISSION IN CHILDREN HOMES</b>						
Whether the organization is following any criteria for admission of children in Homes					Yes	
If Yes Please mention					Order of CWC	

Whether the organization maintains any specific Proforma for recording details of Information of every child		Yes
If Yes, what kind of information you have collected from children		Basic information, Identification Details, Educational Details, Reasons for leaving information Disability Details, Child Details, Case History Report etc.
<b>Maintenance of Registers/Record Maintenance</b>		
S. No.	Details of Register	Please tick <input checked="" type="checkbox"/>
a)	Admission and discharge register	<input checked="" type="checkbox"/>
b)	Individual Care Plan	<input checked="" type="checkbox"/>
c)	Supervision register	<input checked="" type="checkbox"/>
d)	Medical file or medical report	<input checked="" type="checkbox"/>
e)	Nutrition diet file	<input checked="" type="checkbox"/>
f)	Stock Register	<input checked="" type="checkbox"/>
g)	Visitor's book	<input checked="" type="checkbox"/>
h)	Case file	<input checked="" type="checkbox"/>
i)	Inquiry report file	<input checked="" type="checkbox"/>
j)	Stock register	<input checked="" type="checkbox"/>
k)	Any other(Please Specify)	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		-
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		8:00 a.m. to 11:00 a.m., Everyday, 4 Hours Duration
Frequency of Doctor's visit		3 times in a week
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	<input checked="" type="checkbox"/>
b)	Dispensary	<input checked="" type="checkbox"/>
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS		No
Any specialized services are provided for such children		No
If yes, Please provide in details		-
Whether ambulance facility is available for patients		Yes
Any other Facilities		As and when necessary
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Three
What types of special diet is provided for sick infant or children		As per doctor's advice

How many cooks are there		Two					
Whether children are helping at the time of cooking in any way		Yes					
Whether any Nutrition and Child Development Officer is there		Yes					
<b>CLOTHING AND BEDDING</b>							
How many sets of clothes, bedding and other articles are given to children							
S. No.	Item	Number			Frequency (Month/Year)		
a)	Summer Clothing	1			3 times in a year		
b)	Winter Clothing(Jersey)	1			3 times in a year		
c)	School Uniform	1			3 times in a year		
d)	Under garments	1			3 times in a year		
e)	Towel	1			3 times in a year		
f)	Durry	1			3 times in a year		
g)	Blanket	1			3 times in a year		
h)	Pillow	1			3 times in a year		
i)	Shoes/ Chappal	1			3 times in a year		
j)	Tooth powder/paste	1			3 times in a year		
k)	Soap	1			3 times in a year		
l)	Oil	1			3 times in a year		
m)	Utensils (Plate and Glass)	1			3 times in a year		
<b>EDUCATION</b>							
Whether educational facilities are available for children		Yes					
Are any of the educational facilities available within the institution							
S.No	Formal School on Premises	Yes			No		
a)	Pre-school	-			-		
b)	Primary	-			-		
c)	Secondary	-			-		
d)	Higher	-			-		
e)	Non-formal classes	√			-		
f)	Private coaching	-			-		
g)	Bridge Course	-			-		
h)	Any other	-			-		
How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
<b>VOCATIONAL TRAINING</b>							



Whether the homes have vocational training facilities for children					Yes
If Yes, then provide the details of the vocational training offered to children in the following format					
S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained					Yes
If Yes, details of qualification					Requisite qualification
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					Yes
Difficulty (if any)					Not arise
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available					Yes
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	√		Daily	
j)	Radio	√		Daily	
k)	Any Other (Please Specify)	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not					Yes
If Yes, Opening timing or day					2 p.m. to 3 p.m.
What types of books provide for Children					Picture book available, wall picture of fruits, animals, birds,

		vehicles etc.
<b>SANITATION AND HYGIENE</b>		
Whether Sanitation and Hygiene is maintained in the home through following facilities		
S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What type of Co-operation and Co-ordination has been received for homes		From BPHC for medical support, from Police Station Protection support, from administration, administrative support
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Monitoring Committee engaged in monitoring process
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Joy Prakash Institute of Social Change District Social Welfare Officer Joint Director, Department of WCD & Social Welfare, Govt. of West Bengal, BWO, Kumargram Development Block
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the Institution has organized any training programme regarding JJ Act for its Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		★ NIPCCD at Guwahati ★ Joy Prakash Institute of Social

	Change
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ CWC</li> <li>★ Child Line etc</li> </ul>
Suggestion of CWC/Inspection Committee	<ul style="list-style-type: none"> <li>★ Suggestions given for better implementation of Home</li> </ul>
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ Orientation Training on Child Rights and Protection</li> <li>★ Integrated Child Protection Scheme (I.C.P.S)</li> <li>★ Juvenile Justice Act</li> </ul>

<b>WB/01/ NGO/121</b>	
<b>IDENTIFICATION</b>	
Name of the Organization	Jalpaiguri Mahila Kalyan Sangha
Address for Communication	Dr. Abanidhar Guha Sarani, New Town Para P.O. & Dist. Jalpaiguri-735101
Telephone (with STD code)	03561-221029
Fax	Nil
Email ID	jmks_depa@yahoo.com
Website of Organization	Nil
Type of Child Care Institution being run	Shelter Home/Drop in centre
Whether run by	NGO
Name and contact of Chief Functionary	Smt. Pratima Bagchi, Secretary JMKS, Vill. New Town Para, P.O. & Dist. Jalpaiguri
Vision of NGO	It has been provided services for the upliftment of the distressed women of all categories by its multifarious activities
Mission of NGO	To provide institutional care through counseling and guidance, medical and psychiatric check-up, facilities of development of skills, and relationship. To the deserving women and girls who has problems of Marital conflict/ Emotional disturbances, Need Care and protection etc and require help, guidance and shelter
Key Objectives	Empowerment of women and girl children integrated programmes covering men, women, children and the community with the women in the mainstream of development, creating and strengthening linkages in every field and at all levels.
Major Activities	Working as a partner of Sanlaap, kolkata in the field of Child Protection, Rescue, Rehabilitation, Youth Partnership Programme, Anti-Trafficking Programme, Running Child Protection Units at Tea-Garden and Indo-Bangladesh border areas.
Target group/ Stakeholders	Women, Children and Adolescent
Geographical location/area	Jalpaiguri District of West Bengal
<b>LEGAL STATUS OF NGO</b>	
Date and year of establishment	1984
Whether Registered or not	Yes
If Yes, details of registered under which Act the Organization is registered	-

Date and place with registration number					
<i>Date &amp; Year of Registration</i>		<i>Registration No</i>		<i>Registered Place</i>	
20-11-1984		No: S/46770 of 1984-85		Jalpaiguri	
Whether the organization is registered under FCRA				No	
If Yes, FCRA No,				N.A.	
Any other Registration/ Recognition with Central / State Govt.:				Yes	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006				Yes	
Number of Governing Body Members				9	
Physical Assets of the Organization				1,00,000/-	
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization				26	
Total No. of Professional Staff					
a) Male				3	
b) Female				23	
Total number of Full Time				26	
Part time Staff				3	
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
8.34		8.33		7.76	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
-	√	√	√	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are maintained at the organizational level				Annual Reports, Leaflet, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<b><u>Profile of Children Home/ Child Care Institution</u></b>					
<b>Name of Child Care Institution</b>				Anubhab Shelter Home for Juvenile Girls	
Contact Details					
Name of Superintendent/Secretary				Smt. Sabitri Toppo	
Address				Anubhab Home, Club Road, Jalpaiguri	
Phone				03561-221029	
Fax				-	
Email				Jmks_depa@yahoo.com	
<b>Type of Institution</b>				<b>Shelter Home</b>	
Run by				NGO (Jalpaiguri Mahila Kalyan Sangha)	
Year of Establishment of the Home				14.11.2005	

Supported by		MWCD and State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
Capacity		50		
Present Strength		37		
Number of Children lodged in the home having families residing in the same State/UT		37		
Reasons for staying in the home in case of children having families (provide details)		Instead of having families they need care and protection		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	2	0	2
b)	5-10 years	9	0	9
c)	10-15 years	14	0	14
d)	15-18 years	12	0	12
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	13	0	13
b)	4-6 month	1	0	1
c)	6-12 month	5	0	5
d)	1-2 years	9	0	9
e)	2-3 years	3	0	3
f)	3-4 years	3	0	3
g)	4-5 years	2	0	2
h)	More than 5 Years	1	0	1
Number of "Children with special needs" in the home				
S.No.	Category	Number of Children		Total
		Girls	Boys	
a)	Mentally challenged	-	-	-
b)	Autism	-	-	-
c)	Physically challenged	-	-	-
d)	Any other (please specify)	-	-	-
What are the facilities and support services provided for the children staying in Home		-		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960		No		
Any other registration		Registration as Service Provider under P.W.D.V.A. 2005 License/ Registration under Juvenile Justice Act, 2000		
Whether the Institution is certified as Fit Institution by				
a)	Juvenile Justice Board	Yes		
b)	Child Welfare Committee	Yes		
If Yes, Please Specify the Facilities provided		-		

<b>INFRASTRUCTURE</b>						
Infrastructure available						
a)	Owned	-				
b)	Rented	√				
c)	Lease	-				
d)	Donated	-				
Details of Accommodation for Children and Institutional Infrastructure						
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength	
a)	Dormitories	2	450	-	-	
b)	Classrooms	-	-	-	-	
c)	Sick room/ First Aid Room	1	144	-	-	
d)	Kitchen	1	100	-	-	
e)	Dinning Hall	1	100	-	-	
f)	Recreation room	1	225	-	-	
g)	Library	-	-	-	-	
h)	Counseling & Guidance room	1	144	-	-	
i)	Office rooms	1	144	-	-	
j)	Workshops	-	-	-	-	
k)	Separate Bathrooms for boys and girls	7	350	-	-	
l)	Separate Latrines for boys and girls	7	350	-	-	
m)	Store room	1	120	-	-	
n)	Play Ground	1	1250	-	-	
o)	Vocational Training Centre	-	-	-	-	
Total area of the Campus (Sq. ft.)				5000 Sq. Ft.		
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes		
<b>MANPOWER OF CHILDREN HOME</b>						
S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	MA Sociology	15,000/-	-
b)	Social Welfare Officer	1	1	M.S.W.	10,000/-	-
c)	Counselor	1	1	M.S.W., L.L.B.	10,000/-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	1	M.D	8,000/-	-
f)	Paramedical Staff	1	1	H.S.	5,000/-	-
g)	Educator	1	2	M.A.	4,000/-	-
h)	Vocational	0	1	H.S.	1,000/-	-

	Instructor					
i)	Store-keeper cum Accountant	1	1	B. Com.	8,000/-	-
j)	Music Teacher	1	2	M.A., Diploma in dance	4,000/-	-
k)	Sports/ Yoga Teacher	1	1	B. Com.	4,000/-	-
l)	Driver	1	0	-	-	-
m)	Cook	1	1	9 <sup>th</sup>	3,000/-	-
n)	House Aunty	2	2	B.A.	8,000/-	-
o)	Security Guard	1	1	H.S.	2,000/-	-
p)	Helper	1	1	7 <sup>th</sup>	2,000/-	-
q)	Sweeper	0	1	-	1,000/-	-
r)	Any other (Please Specify)	-	-	-	-	-
	Total	15	18	-	-	-

### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Child Welfare Committee, Juvenile Justice Board and Judiciary
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-

### Maintenance of Registers/Record Maintenance

S. No.	Details of Register	Please Tick
a)	Admission and discharge register	√
b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	-

### Minimum Standard of Care

#### MEDICAL CARE

What are the health related services available for Children	Medical Facilities and Ambulance Facilities
Does the home have a Medical Care Unit for health check-up of Children	No
If yes, Opening of day, time and duration of MCU	N.A.
Frequency of Doctor's visit	-
Whether any trained Staff for first-aid	Yes



Referral of Cases			
	Govt. Hospital	√	
	Dispensary	√	
	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
NUTRITION AND DIET SCALE			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Three	
What types of special diet is provided for sick infant or children		As per doctor's Advice	
How many cooks are there		One	
Whether children are helping at the time of cooking in any way		Yes	
Whether any Nutrition and Child Development Officer is there		No	
CLOTHING AND BEDDING			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	As per requirement
b)	Winter Clothing(Jersey)	2	As per requirement
c)	School Uniform	2	As per requirement
d)	Under garments	2	As per requirement
e)	Towel	1	As per requirement
f)	Durry	1	As per requirement
g)	Blanket	1	As per requirement
h)	Pillow	1	As per requirement
i)	Shoes/Chappal	2	As per requirement
j)	Tooth powder/paste	As per requirement	As per requirement
k)	Soap	As per requirement	As per requirement
l)	Oil	As per requirement	As per requirement
m)	Utensils (Plate and Glass)	As per requirement	As per requirement
EDUCATION			
Whether educational facilities are available for children		Yes	
Are any of the educational facilities available within the institution			
a)	Formal School on Premises	Yes	No
b)	Pre-school	√	
c)	Primary	√	
d)	Secondary	√	
e)	Higher		√
f)	Non-formal classes	√	
g)	Private coaching	√	
h)	Bridge Course		√
i)	Any other		-

How many children go to school outside the premises of the institution							
S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	2	0	2	Private	-	Walking
b)	Primary	13	0	13	Govt.	½ km	Walking
c)	Secondary	9	0	9	-	-	Walking
d)	Higher	0	0	0	-	-	-
e)	Non-formal classes	25	0	25	-	-	-
f)	Any other	0	0	0	-	-	-
Whether the institution is providing any pocket money for out going students						No	
If Yes, then how much per child month						-	
Whether the educational facilities are adequate for children						Yes	
If No, what are the other facilities required						-	
VOCATIONAL TRAINING							
Whether the homes have vocational training facilities for children							
If Yes, then provide the details of the vocational training offered to children in the following format							
S.No.	Types of Trade	Number of Children			Duration of Course		
		Boys	Girls	Total			
a)	Cutting and tailoring	-	12	12	6 Months		
b)	Beauty Culture	-	1	1	2 Months		
c)	Computer	-	0	0	0		
d)	Jute bags and 'moti' work	-	15	15	2 Months		
e)	Painting and Mehendi	-	-	-	-		
f)	Books binding	-	-	-	-		
g)	Printing	-	-	-	-		
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-		
i)	Candle making	-	16	16	1 Week		
j)	Pickle making	-	-	-	-		
k)	Soap making	-	-	-	-		
l)	Textile Designing	-	-	-	-		
m)	Electrical trade	-	-	-	-		
n)	Shoes making/leather craft	-	-	-	-		
o)	Any other	-	-	-	-		
Whether instructors are trained					Yes		
If Yes, details of qualification					As per job specified		
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course					No		
Difficulty (if any)					We have no full fledged vocational unit and teacher for our home		
RECREATIONAL FACILITIES							
Whether recreational facilities are available							
If yes, what are the recreation facilities available for children in Institution							
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly			
a)	Indoor games	√		Daily			

b)	Outdoor games	√	Do
c)	Music	√	Do
d)	Television	√	Do
e)	Picnic	√	Twice in a year
f)	Outings	√	Do
g)	Cultural Programme	√	Occasionally
h)	Yoga	√	Daily
i)	Debates	√	Occasionally
j)	Radio	√	Daily
k)	Any Other	-	-

#### **LIBRARY**

Whether library facilities are available or not	No
If Yes, Opening timing or day	-
What types of books provide for Children	-

#### **SANITATION AND HYGIENE**

Whether Sanitation and Hygiene is maintained in the home through following facilities

S. No.	Details of Sanitation and Hygiene	Yes/No
a)	Sufficient treated and filtered drinking water	Yes
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises	Yes
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes

#### **CO-ORDINATION AND COLLABORATION**

Whether the Organization/Institution is Networking with other Govt., NGOs etc	Yes
What types of Co-operation and Co-ordination received for homes	The Organisation has been working as a partner of Sanlaap, kolkata in the field of Child Protection, rescue, Rehabilitation, Youth partnership Programme, Anti-Trafficking Programme, Running Child Protection Units at Tea-Garden and Indo-Bangladesh Border areas.

#### **MONITORING AND EVALUATION**

Mechanism used by the Institution to monitor the activities of homes	Monthly Staff Meeting and Self Evaluation Format
Whether any specific evaluation of the Organization/Institution has been conducted in the past	Yes
If Yes, when and by whom	SANLAAP, SAMIKHANI, Kolkata
Whether CWC members visit your institution regularly	Yes

#### **TRAINING NEEDS**

Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff	No
If Yes, a) Number of Training Programmes organized	-
b) Details of Training Programmes	-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry	Yes
If Yes, Please specify	<ul style="list-style-type: none"> <li>★ NIPCCD</li> <li>★ Central Social Welfare Board</li> <li>★ West Bengal State Social Welfare Board</li> <li>★ SANLAAP, Kolkata</li> <li>★ Joy Prakash Narayan Institute of Social Change</li> <li>★ PRAJAAK, Kolkata</li> <li>★ Samikshani, Kolkata</li> </ul>
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities	<ul style="list-style-type: none"> <li>★ Department of Women Child Development and Social Welfare</li> <li>★ West Bengal Social Board</li> <li>★ Central Social Welfare Board</li> <li>★ NIPCCD</li> <li>★ West Bengal State Women Comission</li> <li>★ District Administration of Jalpaiguri, W.B.</li> <li>★ District Police Administration of Jalpaiguri</li> <li>★ District Legal Services Authority, Jalpaiguri</li> <li>★ Child Line(1098)</li> <li>★ SANLAAP, Kolkata</li> <li>★ Joy Prakash Narayan Institute of Social Change</li> <li>★ PRAJAAK, Kolkata</li> <li>★ Samikshani, Kolkata</li> <li>★ Various State &amp; District Level NGOs and CBOs</li> </ul>
Suggestion of CWC/Inspection Committee	★ There is no such suggestion in written been placed by CWC
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities	<ul style="list-style-type: none"> <li>★ JJ Act</li> <li>★ PWDV Act</li> <li>★ ICPS</li> <li>★ FCC</li> <li>★ Health &amp; Nutrition etc</li> </ul>

<b>WB/02/ NGO/122</b>		
<b>IDENTIFICATION</b>		
Name of the Organization	Vivekananda Lok Siksha Niketan	
Address for Communication	Village Faridpur, P.O. Dakshin Dauki, Dist- Purba Medinipur, West Bengal- 721450	
Telephone (with STD code)	03220-284060	
Fax	-	
Email ID	<a href="mailto:pmchildline@yahoo.co.in">pmchildline@yahoo.co.in</a>	
Website of Organization	No	
Type of Child Care Institution being run	Children Home and Shishu Greh	
Whether run by	NGO	
Name and contact of Chief Functionary	-	
Vision of NGO	-	
Mission of NGO	Equal opportunities for all to lead a quality life	
Key Objectives	-	
Major Activities	ICDS, Children Home, Childline, Handicapped School	
Target group/ Stakeholders	Women, Children and Adolescent	
Geographical location/area	-	
<b>LEGAL STATUS OF NGO</b>		
Date and year of establishment	1982	
Whether Registered or not	Yes	
If Yes, details of registered under which Act the Organization is registered	-	
Date and place with registration number		
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>	<i>Registered Place</i>
23.09.1982	S/38056	Kolkata
Whether the organization is registered under FCRA	Yes	
If Yes, FCRA No,	147040042	
Any other Registration/ Recognition with Central / State Govt.:	-	
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes	
Number of Governing Body Members	12	
Physical Assets of the Organization	Yes	
<b>MANPOWER OF ORGANIZATION</b>		
Total manpower of your Organization	465	
Total No. of Professional Staff		
a) Male	14	
b) Female	4	
Total number of Full Time	431	
Part time Staff	34	
<b>FINANCIAL MANAGEMENT</b>		

Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
3,13,04,528		2,09,33,450		2,49,40,139	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	√	√	√	-
DOCUMENTATION					
Which of the following documents/communication material are maintained at the organizational level				Annual Reports, Leaflet, Pamphlet and Audit Report	
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside				No	
<u>Profile of Children Home/ Child Care Institution</u>					
<b>Name of Child Care Institution</b>				Bodhodaya Home	
Contact Details					
Name of Superintendent/Secretary				Brajagopal Sahoo, Secretary	
Address				Faridpur, Dk. Dauki, Purba Midnapore	
Phone				9434369743	
Fax				-	
Email				pmchildline@yahoo.co.in	
<b>Type of Institution</b>				<b>Children Home (Both Boys and Girls)</b>	
Run by				NGO	
Year of Establishment of the Home				2008	
Supported by				State Govt.	
<b>Whether registered under 34(3) of JJ Act with the State Government</b>				<b>Yes</b>	
Number of inmates					
Capacity				50	
Present Strength				30	
Number of Children lodged in the home having families residing in the same State/UT				26	
Reasons for staying in the home in case of children having families (provide details)				Family cannot properly maintain their children due to acute poverty	
Age breakup of children					
S.No.	Age	Number of Children		Total	
		Girls	Boys		
a)	0-5 years	2	-	2	
b)	5-10 years	-	24	24	
c)	10-15 years	-	4	4	
d)	15-18 years	-	-	-	
Details of Stay of Children in the home					
S.No.	Duration	Number of Children		Total	
		Girls	Boys		
a)	0-4 month	-	8	8	
b)	4-6 month	-	4	4	
c)	6-12 month	2	4	6	

d)	1-2 years	-	4	4	
e)	2-3 years	-	8	8	
f)	3-4 years	-	-	-	
g)	4-5 years	-	-	-	
h)	More than 5 Years	-	-	-	
Number of "Children with special needs" in the home					
S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	-	9	9	
b)	Autism	-	-	-	
c)	Physically challenged	-	1	1	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Lodging, Education, Coaching, Counseling, Mental Health Analysis, Recreation, Sports & Games, Vocational Training, Outer visit etc.		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			No		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	Yes			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S. No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	6	2430	50	-
b)	Classrooms	2	450	50	-
c)	Sick room/ First Aid Room	1	120	4	-
d)	Kitchen	1	120	50	-
e)	Dinning Hall	1	1000	80	-
f)	Recreation room	1	500	50	-
g)	Library	-	500	50	-
h)	Counseling & Guidance room	1	80	2	-
i)	Office rooms	1	250	-	-
j)	Workshops	-	250	-	-
k)	Separate Bathrooms for boys and girls	8	200	50	-
l)	Separate Latrines for boys and girls	8	200	50	-

m)	Store room	1	150	-	-
n)	Play Ground	1	10000	50	-
o)	Vocational Training Centre	2	380	30	-
Total area of the Campus (Sq. ft.)				-	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	

#### MANPOWER OF CHILDREN HOME

S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	-	M.S.W.	-	-
b)	Social Welfare Officer	1	-	M.S.W.	-	-
c)	Counselor	1	-	M.A.	-	-
d)	Case Worker	-	-	-	-	-
e)	Doctor (Part time or Full time)	1	-	M.B.B.S.	-	-
f)	Paramedical Staff	1	-	Pharmacist	-	-
g)	Educator	2	-	B.A.	-	-
h)	Vocational Instructor	1	-	-	-	-
i)	Store-keeper cum Accountant	1	-	B.A.	-	-
j)	Music Teacher	1	-	B. Music	-	-
k)	Sports/ Yoga Teacher	1	-	B.P.Ed.	-	-
l)	Driver	-	-	-	-	-
m)	Cook	1	-	8 <sup>th</sup>	-	-
n)	House Aunty	1	-	H.S.	-	-
o)	Security Guard	1	-	8 <sup>th</sup>	-	-
p)	Helper	1	-	8 <sup>th</sup>	-	-
q)	Sweeper	1	-	4 <sup>th</sup>	-	-
r)	Any other (Please Specify)- Home Father	1	-	B.A.	-	-
Total		17	-	-	-	-

#### CRITERIA FOR ADMISSION IN CHILDREN HOMES

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	As per order of Child Welfare Committee and JJB
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	-



Maintenance of Registers/Record Maintenance			
S. No.	Details of Register		Please Tick
a)	Admission and discharge register		√
b)	Individual Care Plan		-
c)	Supervision register		√
d)	Medical file or medical report		√
e)	Nutrition diet file		√
f)	Stock Register		√
g)	Visitor's book		√
h)	Case file		√
i)	Inquiry report file		√
j)	Stock register		√
k)	Any other(Please Specify)		-
Minimum Standard of Care			
MEDICAL CARE			
What are the health related services available for Children		-	
Does the home have a Medical Care Unit for health check-up of Children		No	
If yes, Opening of day, time and duration of MCU		-	
Frequency of Doctor's visit		Yes	
Whether any trained Staff for first-aid		Yes	
Referral of Cases			
a)	Govt. Hospital	√	
b)	Dispensary	-	
c)	Any other	-	
How many children are suffering from communicable diseases and HIV/AIDS		Nil	
Any specialized services are provided for them		No	
If yes, Please provide in details		-	
Whether ambulance facility is available for patients		Yes	
Any other Facilities		-	
NUTRITION AND DIET SCALE			
Whether any menu chart followed by homes		Yes	
How many times meals are provided in a day		Four	
What types of special diet is provided for sick infant or children		As per doctor's Advice	
How many cooks are there		Two	
Whether children are helping at the time of cooking in any way		No	
Whether any Nutrition and Child Development Officer is there		Yes	
CLOTHING AND BEDDING			
How many sets of clothes, bedding and other articles are given to children			
S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	4	Year
b)	Winter Clothing(Jersey)	2	Year
c)	School Uniform	2	Year

d)	Under garments	2	Year
e)	Towel	2	Year
f)	Durry	2	Year
g)	Blanket	2	2 Year
h)	Pillow	2	Year
i)	Shoes/Chappal	2	Year
j)	Tooth powder/paste	2	Month
k)	Soap	1	Month
l)	Oil	1	Month
m)	Utensils (Plate and Glass)	2	Year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	√	
c)	Primary		√
d)	Secondary		√
e)	Higher		√
f)	Non-formal classes	√	
g)	Private coaching	√	
h)	Bridge Course		√
i)	Any other		-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	1	-	1	Govt.	-	-
b)	Primary	23	22	1	Govt.	-	-
c)	Secondary	2	2	-	Govt.	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	4	4	-	Private	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	-	-	-
b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-

g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	4	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				-	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				No	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Weekly	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Weekly	
i)	Debates	-		-	
j)	Radio	-		-	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				No	
If Yes, Opening timing or day				-	
What types of books provide for Children				-	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes, maintenance & cleanliness of the premises			Yes	
c)	Proper drainage System			Yes	
d)	Arrangements for disposal of garbage			Yes	
e)	Protection from mosquitoes			Yes	
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)			Yes	

g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		-
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		-
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		-
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		★ NIPCCD ★ Jayprakash Institute of Social Change ★ District Administration
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		-
Suggestion of CWC/Inspection Committee		-
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Methods for running JJ Home specially cognitive behavioral method and mental health analysis of children

<b>WB/03/ NGO/123</b>	
<b>IDENTIFICATION</b>	
Name of the Organization	Khagrabari Rural Energy Development Association (KREDA)
Address for Communication	Regd. Office At- Taltala, P.O. Khagrabari, Dist.-Cooch Behar, Pin-736101
Telephone (with STD code)	03582-250116, 9434191319
Fax	03582-250116
Email ID	<a href="mailto:kreda@sancharnet.in">kreda@sancharnet.in</a>
Website of Organization	<a href="http://www.kreda.org">www.kreda.org</a>
Type of Child Care Institution being run	Shelter Home/ Drop in Centre and Orphanage
Whether run by	NGO
Name and contact of Chief Functionary	Narendra Chandra Sutradhar (Secretary) At Taltala, P.O. Khagrabari, Dist. Cooch Behar, Pin-736116
Vision of NGO	To attain social and economical justice. Peace and development in a society free from oppression by sex, class and race. It wants a society where poverty, and all forms of oppression will be eliminated, basic needs of the poor, particularly the women and the children will become basic rights where each person will have the opportunity to develop his or her potential and creativity
Mission of NGO	Integrated and free development of all people with the specific option for women and children. The main goal is to support and promote activities for all individuals, particularly for the women and children by identifying and solving their needs and problem along with their families and community of which they form an integral part
Key Objectives	To fight against Child abuse and Child Trafficking and to develop and promote Child Rights, Women Rights & to develop measures for coordination of governmental and voluntary action in social development and to organize specialized Children's Home and non formal school for child's labours and disabled persons and to organize Creche Centres for working mother's children
Major Activities	Home for Mentally Retarded Girls and

	Boys under JJ Act, Home for Destitute Girls under Cottage Scheme, Skills Development Training, Micro Finance and Insurance, Sanitation etc.				
Target group/ Stakeholders	Women, Children and Adolescent				
Geographical location/area	Through out Jalpaiguri & Cooch Behar District in West Bengal				
<b>LEGAL STATUS OF NGO</b>					
Date and year of establishment	01-02-1996				
Whether Registered or not	Yes				
If Yes, details of registered under which Act the Organization is registered	West Bengal Societies Registration Act XXVI of 1961				
Date and place with registration number					
<i>Date &amp; Year of Registration</i>	<i>Registration No</i>		<i>Registered Place</i>		
01-02-1996 & 1995-96	S/82616		Kolkata, West Bengal		
Whether the organization is registered under FCRA	Yes				
If Yes, FCRA No,	146970007				
Any other Registration/ Recognition with Central / State Govt.:	Registration under Section 12A of the Income Tax Act, 1961. Exemption under section 80G of the Income Tax Act, 1961. Certificate of Recognition under Section 52(2) & (4) of the Persons with disability				
Whether your Child Care Institutions/Organizations are registered with the State Govt. under Juvenile Justice (Care and Protection) Act 2000 Sec. 34(3) Amended in 2006	Yes				
Number of Governing Body Members	9				
Physical Assets of the Organization	Total fixed assets including Furniture, Building & Others is Rs.84,53,951.27				
<b>MANPOWER OF ORGANIZATION</b>					
Total manpower of your Organization	77				
Total No. of Professional Staff					
Male	58				
Female	19				
Total number of					
Full Time	56				
Part time Staff	21				
<b>FINANCIAL MANAGEMENT</b>					
Annual Budget of Organization for last three years					
2009-10		2008-09		2007-08	
5,98,53,168.00		5,79,59,531.00		5,44,73,177.93	
Sources of Funding of the NGO (Cash/kind/other)					
Community Support	State Govt.	National	International	Donation	Any Other (Please specify)
√	√	-	-	√	-
<b>DOCUMENTATION</b>					
Which of the following documents/communication material are				Annual Reports, Brochure, Leaflet,	

maintained at the organizational level		Pamphlet and Audit Report		
For documentation (Annual report and proposal writing) whether the organization has engaged any expert from outside		No		
<b><u>Profile of Children Home/ Child Care Institution</u></b>				
<b>Name of Child Care Institution</b>		Tapoban(Unit-I), a mentally retarded home for girls under JJ Act		
Contact Details				
Name of Superintendent/Secretary		Narendra Chandra Sutradhar (Secretary)		
Address		At Taltala, P.O. Khagrabari, Dist. Cooch Behar, Pin-736116		
Phone		03582-250116, 9434191319		
Fax		03582-250116		
Email		<a href="mailto:kreda@sancharnet.in">kreda@sancharnet.in</a>		
<b>Type of Institution</b>		<b>Special Home</b>		
Run by		NGO (Khagrabari Rural Energy Development Association – KREDA)		
Year of Establishment of the Home		2006		
Supported by		MWCD and State Govt.		
<b>Whether registered under 34(3) of JJ Act with the State Government</b>		<b>Yes</b>		
Number of inmates				
a) Capacity		25		
b) Present Strength		29		
Number of Children lodged in the home having families residing in the same State/UT		N.A.		
Reasons for staying in the home in case of children having families (provide details)		N.A.		
Age breakup of children				
S.No.	Age	Number of Children		Total
		Girls	Boys	
a)	0-5 years	-	-	-
b)	5-10 years	2	-	2
c)	10-15 years	10	-	10
d)	15-18 years	17	-	17
Details of Stay of Children in the home				
S.No.	Duration	Number of Children		Total
		Girls	Boys	
a)	0-4 month	4	-	4
b)	4-6 month	2	-	2
c)	6-12 month	-	-	-
d)	1-2 years	2	-	2
e)	2-3 years	11	-	11
f)	3-4 years	5	-	5
g)	4-5 years	5	-	5
h)	More than 5 Years	-	-	-
Number of “Children with special needs” in the home				

S.No.	Category	Number of Children		Total	
		Girls	Boys		
a)	Mentally challenged	29	-	29	
b)	Autism	-	-	-	
c)	Physically challenged	-	-	-	
d)	Any other (please specify)	-	-	-	
What are the facilities and support services provided for the children staying in Home			Food, Lodging, Education, Recreation, Sports & Games, Vocational Training, Proper Care, Medical Support etc		
Whether Institution has been registered under The Orphanage And Other Charitable Homes (supervision and control) Act-1960			Yes		
Any other registration			-		
Whether the Institution is certified as Fit Institution by					
a)	Juvenile Justice Board	-			
b)	Child Welfare Committee	Yes			
If Yes, Please Specify the Facilities provided			-		
<b>INFRASTRUCTURE</b>					
Infrastructure available					
a)	Owned	√			
b)	Rented	-			
c)	Lease	-			
d)	Donated	-			
Details of Accommodation for Children and Institutional Infrastructure					
S.No.	Particulars	Number	Size (Sq. ft.)	Capacity/Required Strength	Actual Strength
a)	Dormitories	1	23 * 24	25	29
b)	Classrooms	1	20 * 15	25	29
c)	Sick room/ First Aid Room	1	9 * 14	25	29
d)	Kitchen	1	12 * 21	25	29
e)	Dinning Hall	1	15 * 21	25	29
f)	Recreation room	1	23 * 24	25	29
g)	Library	1	10 * 12	25	29
h)	Counseling & Guidance room	1	10 * 12	25	29
i)	Office rooms	1	12 * 15	25	29
j)	Workshops	1	12 * 15	25	29
k)	Separate Bathrooms for boys and girls	6	105	25	29
l)	Separate Latrines for boys and girls	6	105	25	29
m)	Store room	1	10 * 12	25	29
n)	Play Ground	1	2.5 Acre	25	29
o)	Vocational Training Centre	1	10 * 12	25	29
Total area of the Campus (Sq. ft.)				36,000 Sq. Ft	
Whether the dormitories, classrooms and workshops have sufficient ventilation and Light				Yes	
<b>MANPOWER OF CHILDREN HOME</b>					



S. No	Details of Staff	Sanctioned Strength	Actual Strength	Educational Qualification	Salary / Honorarium per month	Associated with the Institution (Month/Year)
a)	Superintendent/ Project Manager	1	1	Graduate with 5 years experience	3,000.00	01-04-2006
b)	Social Welfare Officer	1	1	Graduate with 5 years experience	2,500.00	01-04-2006
c)	Counselor	1	1	Graduate with 5 years experience	2,500.00	01-04-2006
d)	Case Worker	1	1	Graduate with 3years experience	2,500.00	01-04-2006
e)	Doctor (Part time or Full time)	1	1	M.B.B.S.	3,000.00	01-04-2006
f)	Paramedical Staff	1	1	H.S. Trained	2,000.00	01-04-2006
g)	Educator	-	-	Graduate with special education	2,000.00	01-04-2006
h)	Vocational Instructor	1	1	H.S. Trained	1,800.00	01-04-2006
i)	Store-keeper cum Accountant	1	1	B. Com.	1,500.00	01-04-2006
j)	Music Teacher	1	1	Graduate with Trained	1,500.00	01-04-2006
k)	Sports/ Yoga Teacher	1	1	Graduate with Trained	1,500.00	01-04-2006
l)	Driver	1	1	Class VIII	1,200.00	01-04-2006
m)	Cook	1	1	Class VI	1,200.00	01-04-2006
n)	House Aunty	1	1	Class VIII	1,200.00	01-04-2006
o)	Security Guard	1	1	M. P.	1,200.00	01-04-2006
p)	Helper	1	1	Class VIII	1,200.00	01-04-2006
q)	Sweeper	1	1	Class IV	1,200.00	01-04-2006
r)	Any other (Please Specify)	-	-	-	-	-
	Total	16	16	-	30,500.00	-

**CRITERIA FOR ADMISSION IN CHILDREN HOMES**

Whether the organization is following any criteria for admission of children in Homes	Yes
If Yes Please mention	Order of CWC
Whether the organization maintains any specific Proforma for recording details of Information of every child	Yes
If Yes, what kind of information you have collected from children	Basic information, Identification Details, Educational Details, Reasons

		for leaving information Disability Details, Child Details, Case History Report etc.
<b>Maintenance of Registers/Record Maintenance</b>		
S.No.	Details of Register	Please Tick
a)	Admission and discharge register	√
b)	Individual Care Plan	√
c)	Supervision register	√
d)	Medical file or medical report	√
e)	Nutrition diet file	√
f)	Stock Register	√
g)	Visitor's book	√
h)	Case file	√
i)	Inquiry report file	√
j)	Stock register	√
k)	Any other(Please Specify)	-
<b>Minimum Standard of Care</b>		
<b>MEDICAL CARE</b>		
What are the health related services available for Children		Health Check up, Medicine, Referral Services, Ambulance Services
Does the home have a Medical Care Unit for health check-up of Children		Yes
If yes, Opening of day, time and duration of MCU		Opening time 8:00 a.m. to 11:00 a.m., Every Day, 4 Hours Duration
Frequency of Doctor's visit		3 times in a week
Whether any trained Staff for first-aid		Yes
<b>Referral of Cases</b>		
a)	Govt. Hospital	√
b)	Dispensary	√
c)	Any other	-
How many children are suffering from communicable diseases and HIV/AIDS		Nil
Any specialized services are provided for them		No
If yes, Please provide in details		-
Whether ambulance facility is available for patients		Yes
Any other Facilities		As and when necessary
<b>NUTRITION AND DIET SCALE</b>		
Whether any menu chart followed by homes		Yes
How many times meals are provided in a day		Three
What types of special diet is provided for sick infant or children		As per doctor's Advice
How many cooks are there		Two
Whether children are helping at the time of cooking in any way		Yes
Whether any Nutrition and Child Development Officer is there		Yes
<b>CLOTHING AND BEDDING</b>		
How many sets of clothes, bedding and other articles are given to children		

S. No.	Item	Number	Frequency (Month/Year)
a)	Summer Clothing	1	3 times in a year
b)	Winter Clothing(Jersey)	1	3 times in a year
c)	School Uniform	1	3 times in a year
d)	Under garments	1	3 times in a year
e)	Towel	1	3 times in a year
f)	Durry	1	3 times in a year
g)	Blanket	1	3 times in a year
h)	Pillow	1	3 times in a year
i)	Shoes/Chappal	1	3 times in a year
j)	Tooth powder/paste	1	3 times in a year
k)	Soap	1	3 times in a year
l)	Oil	1	3 times in a year
m)	Utensils (Plate and Glass)	1	3 times in a year

### EDUCATION

Whether educational facilities are available for children Yes

Are any of the educational facilities available within the institution

a)	Formal School on Premises	Yes	No
b)	Pre-school	-	-
c)	Primary	-	-
d)	Secondary	-	-
e)	Higher	-	-
f)	Non-formal classes	√	-
g)	Private coaching	-	-
h)	Bridge Course	-	-
i)	Any other	-	-

How many children go to school outside the premises of the institution

S. No.	Class/Standard	Total Number of Children	Boys	Girls	Govt./ Private	Distance of School	Mode of Travel
a)	Pre-school	-	-	-	-	-	-
b)	Primary	-	-	-	-	-	-
c)	Secondary	-	-	-	-	-	-
d)	Higher	-	-	-	-	-	-
e)	Non-formal classes	-	-	-	-	-	-
f)	Any other	-	-	-	-	-	-

Whether the institution is providing any pocket money for out going students No

If Yes, then how much per child month -

Whether the educational facilities are adequate for children Yes

If No, what are the other facilities required -

### VOCATIONAL TRAINING

Whether the homes have vocational training facilities for children Yes

If Yes, then provide the details of the vocational training offered to children in the following format

S.No.	Types of Trade	Number of Children			Duration of Course
		Boys	Girls	Total	
a)	Cutting and tailoring	-	10	10	4 Months

b)	Beauty Culture	-	-	-	-
c)	Computer	-	-	-	-
d)	Jute bags and 'moti' work	-	-	-	-
e)	Painting and Mehendi	-	-	-	-
f)	Books binding	-	-	-	-
g)	Printing	-	-	-	-
h)	Auto Rickshaw/motor cycle/ mobile repairing	-	-	-	-
i)	Candle making	-	-	-	-
j)	Pickle making	-	-	-	-
k)	Soap making	-	-	-	-
l)	Textile Designing	-	-	-	-
m)	Electrical trade	-	-	-	-
n)	Shoes making/leather craft	-	-	-	-
o)	Any other	-	-	-	-
Whether instructors are trained				Yes	
If Yes, details of qualification				Requisite qualification	
Whether networking with any Institute/NGO/placement Agency for placement of children after completion of Course				Yes	
Difficulty (if any)				-	
<b>RECREATIONAL FACILITIES</b>					
Whether recreational facilities are available				Yes	
If yes, what are the recreation facilities available for children in Institution					
S.No.	Activity	Please Tick mark against activity		Frequency-daily, per week, monthly, yearly	
a)	Indoor games	√		Daily	
b)	Outdoor games	√		Daily	
c)	Music	√		Daily	
d)	Television	√		Daily	
e)	Picnic	√		Yearly	
f)	Outings	√		Yearly	
g)	Cultural Programme	√		Yearly	
h)	Yoga	√		Daily	
i)	Debates	√		Daily	
j)	Radio	√		Daily	
k)	Any Other	-		-	
<b>LIBRARY</b>					
Whether library facilities are available or not				Yes	
If Yes, Opening timing or day				2:00 p.m. to 3:00 p.m.	
What types of books provide for Children				Picture book available, wall picture of fruits, animals, birds, vehicles etc.	
<b>SANITATION AND HYGIENE</b>					
Whether Sanitation and Hygiene is maintained in the home through following facilities					
S.No.	Details of Sanitation and Hygiene			Yes/No	
a)	Sufficient treated and filtered drinking water			Yes	
b)	Sufficient water for bathing and washing clothes,			Yes	

	maintenance & cleanliness of the premises	
c)	Proper drainage System	Yes
d)	Arrangements for disposal of garbage	Yes
e)	Protection from mosquitoes	Yes
f)	Sufficient number of latrines/toilets (at least one latrine for seven children)	Yes
g)	Sufficient number of bathrooms (at least one bathroom for ten children)	Yes
h)	Sufficient space for washing	Yes
i)	Clean and fly-proof kitchen	Yes
<b>CO-ORDINATION AND COLLABORATION</b>		
Whether the Organization/Institution is Networking with other Govt., NGOs etc		Yes
What types of Co-operation and Co-ordination received for homes		From BPHC for medical support, from Police Station Protection support, from administration, administrative support
<b>MONITORING AND EVALUATION</b>		
Mechanism used by the Institution to monitor the activities of homes		Monitoring Committee engaged in monitoring process
Whether any specific evaluation of the Organization/Institution has been conducted in the past		Yes
If Yes, when and by whom		Joy Prakash Institute of Social Change
Whether CWC members visit your institution regularly		Yes
<b>TRAINING NEEDS</b>		
Whether the NGO/Institution has organized any training programme regarding JJ Act for Staff		No
If Yes,		
a) Number of Training Programmes organized		-
b) Details of Training Programmes		-
Whether your staff or members from your organization/Institution has attended any training programme organized by any other outside Organization/ Department/ Ministry		Yes
If Yes, Please specify		★ NIPCCD at Guwahati ★ Joy Prakash Institute of Social Change
Dept./Agencies/Institutions with which your Organization/Institution is collaborating/ coordinating for various activities		★ CWC ★ Child Line etc
Suggestion of CWC/Inspection Committee		★ Suggestions given for better implementation of Home
Mention Areas/issues on which the Staff/Members of your Organization/ Institution would like to attend the training programme/workings at Institution like NIPCCD to build their capacities		★ Orientation Training on Child Rights and Protection ★ Integrated Child Protection Scheme (I.C.P.S) ★ Juvenile Justice Act