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Government of Odisha Department of Social Security & Empowerment of Persons with Disabilities

No 1984 SSEPD Dt 20:11:15
55 EPD-DA2-MISC-0022-2015

Notice for Expression of Interest

Financial Support from State Government to NGOs for Providing Rehabilitation & Therapeutic Services to Children/Persons with Intellectual Disabilities

In order to ensure proper Rehabilitation of Children/Persons with Intellectual Disabilities (Mental Retardation, Cerebral Palsy, Autism and Mental Illness), the State Government desire to extend financial support to Non-Government Organizations for providing Rehabilitation and Therapeutic Services to Children/Persons with Intellectual Disabilities, under the following terms and conditions.

- This financial support will be different from the financial assistance which is currently being provided by the State Government as Grant-in-Aid to NGOs for running 51 Special Schools. It is not meant for running/opening of Special Schools.
- 2. This financial support will be given only for the purpose of providing Rehabilitation and Therapeutic Services to Children/Persons with Intellectual Disabilities.
- 3. This financial support shall be given in the form of 'Managerial Support' which can be utilised by the NGO for day to day expenses, purchase of equipments, infrastructure costs, staff remunerations, etc.
- 4. The intention of the State Government behind extending such support is to supplement the efforts of NGOs working in the field of Rehabilitation and Therapeutic Services to Children/Persons with Intellectual Disabilities. Therefore, there shall not be any Employer-Employee relationship between the State Government and the staff of the supported NGO. The staff of such NGOs shall neither be treated as Government employees nor their remuneration be

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fixed in the pattern of that of Government employees. The NGO will be at liberty to decide remuneration of its employees itself.

- 5. NGOs currently working in the field of Intellectual Disability (i.e. providing Education, Rehabilitation and Therapeutic Services to Children/Persons with Intellectual Disabilities, in residential or non-residential mode) for atleast 3 years continuously shall be considered eligible for such financial support from the State Government.
- 6. The State Government reserves the right to select a few NGOs from amongst the eligible ones for such financial support considering its Budgetary limit.
- 7. Quantum of financial support shall be decided on case to case basis.

Interested NGOs are hereby called upon to submit their Expression of Interest, addressed to the undersigned, in the prescribed format by 31.12.2015.

Saswat Mishra, IAS Commissioner-cum-Secretary

20:11:15

APPLICATION FOR MANAGERIAL SUPPORT TO NGOs FOR PROVIDING REHABILITATION AND THERAPEUTIC SERVICES TO PERSONS WITH INTELLECTUAL DISABILITIES

PART-A: PARTICULARS OF THE ORGANISATION.

1. Name of the NGO

2. Date of Establishment

3. Registration Details (Acts under which egistered with No., date & validity).

N.B.: Enclose copies of Certificates & By Laws.

- (i) Society/Trust/Company Act (specify)
- (ii) FCRA, 1976
- (iii) Income Tax Act, 1961 (139A, 12AA&203A).
- (iv) PWDAct, 1995
- (v) NTMR Act, 1999
- (vi) Juvenile Justice Act, 2000
- (vii) Any other (specify)
- Details of Governing Body/Managing : Committee of the Organization (in the format).

SI. No.	Name & Address	Occupation	Tel. No.	Educational Qualification

- 5. Financial status of the organization (enclose Audited accounts for last 3 years).
- Whether the organization is ever: blacklisted or charge sheeted by any authorities? If yes, details thereof.
- 7. Any other (specify)



PART-B: REHABILITATION/THERAPEUTIC SERVICES CENTRE.

1.	Name of the Centre	:				
2.	Date of Establishment	•				
3.	Location	:	,			
4.	Category of Persons with Intellectual Disabilities	:				
5.	Details of Services Provided	:				
6.	Number of Boarders/ Non-Boarders, (Enclose list Category wise and Sex wise)	:				
7.	Staff Position	:				
SI. No.	Name of Staff	Designation	Job Description	Continuing since		
8.	Details of land and building : (enclose : copy of ROR, Copy of Agreement in case of rented building)					
9.	Account Number with IFSC Code :					
10.	Whether receiving grant from any source (if yes, please specify)					
11.	Amount of assistance per annum Applied (enclose detailed estimate) :					
12.	Any other Information (Separate Sheets can be er	: nclosed)				
	Date		Signature of S Name :	Secretary with Seal		

21

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