

## FORMAT

1. Name of the WSHG/Federation: \_\_\_\_\_
2. SHG Address (As applicable):  
Village: \_\_\_\_\_ Post Office: \_\_\_\_\_  
Block: \_\_\_\_\_ District: \_\_\_\_\_ PIN: \_\_\_\_\_  
ICDS Project: \_\_\_\_\_
3. Year of Formation: \_\_\_\_\_
4. Present livelihood activities Undertaking: \_\_\_\_\_
5. Name of the Village where the activity will be taken up: \_\_\_\_\_
6. Whether the SHG has undergone training at Krishi Vigyan Kendra (KVKs) or by FARD Department on corresponding livelihood activity (Yes/No): \_\_\_\_\_
7. Savings Bank Account Number: \_\_\_\_\_
8. Bank, Branch Name: \_\_\_\_\_
9. IFS Code: \_\_\_\_\_
10. Funds available in the Savings bank Account: \_\_\_\_\_
11. Whether following activities are practised:
  - a. Regular Saving (Yes/No):
  - b. Amount Savings per Month:
  - c. Whether Loan taken (Yes/No), If, Yes, mention the number of times loan availed:
  - d. Mode of Loan repayment (Regular/Irregular):
  - e. Meeting Register maintained (Yes/No):
  - f. Cash Book maintained (Yes/No):
12. Contact Number \_\_\_\_\_

Signature of the Authorised Person of the  
SHG/Federation

Date:

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### Acknowledgement

Received the Expression of Interest from \_\_\_\_\_ SHG/Federation \_\_\_\_\_  
on date \_\_\_\_\_ for Goatary farming (30+2).

Signature of the CDPO/Authorised Signatory

Date: