



**DISTRICT PROGRAMME MONITORING UNIT  
(MISSION SHAKTI: SUBARNAPUR)  
DSWO SECTION : COLLECTORATE**

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**ଶକ୍ତି**

Letter No. 2573 / Mission Shakti

Date: 17/11 / 2022.

**Inviting Expression of Interest for eligible WSHG/Federation  
for different activities under PR & DW Department.**

Interested WSHGs/ Federation having the willingness and aptitude for different activities under PR & DW Department are invited to submit their proposal to the Concerned CDPO in the below format within 15(Fifteen) days of this advertisement i.e by 5<sup>th</sup> December 2022. Such willingness shall be submitted to concern CDPO.

N.B: Application format available in concerned Block or **ICDS** Office & District Portal (Subarnapur.nic.in).

Encl: List of Activities.

Yours faithfully,

*[Signature]*  
District Social Welfare Officer,  
Subarnapur

Memo No. 2574 Dt. 17/11 / 2022.

Copy forwarded to all CDPOs, all BDOs of Subarnapur for information and fix the notice in the notice board of Sub-Collector, BDO, CDPO and other Block level officers and also get acknowledgement from AWWs, GPLFs & BLF of the concerned GP after supply of above.

Copy forwarded to the DPO Subarnapur, APOs (MGNREGS) & DPM, OLM Subarnapur for information & necessary action.

Copy Submitted to the CDO-cum-EO, Zilla Parishad for kind information and necessary action.

Copy Forwarded to DIO NIC, Subarnapur with a request to webhost the EOI in District Portal.

Copy submitted to PA to Collector for kind information of Collector & DM, Subarnapur.

Copy Submitted to the Joint Secretary to Govt., Department of Mission Shakti for kind information with a request to provision to upload in MS Mobile Application.

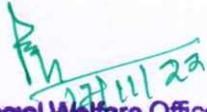
*[Signature]*  
District Social Welfare Officer,  
Subarnapur

**DPMU, Mission Shakti, Subarnapur.**  
O/O-DSWO, Collectorate, Subarnapur, Odisha – 767 017.  
Email : [dpmusub@gmail.com](mailto:dpmusub@gmail.com) & [dswosonepur@nic.in](mailto:dswosonepur@nic.in).

## **MISSION SHAKTI:SUBARNAPUR**

### **List of Activities Under PR & DW Dept.**

<b>SI No</b>	<b>Name of the Activities</b>
1	<b>MGNREGS</b>
	a. Individual assets for members of SHGs
	b. Raising & maintenance of nurseries at GP Level
	c. Plantation in 10,000 School Premises
	d. Nutri-garden (Mo Upakari Bagicha)
	e. Engagement as Village Resource Persons(VRPs)
	f. Issue of Job Cards
2	Providing services for quality testing of Rural Water Supply
3	Monitoring of Rural Water Supply & Collection of Water user fee.

  
District Social Welfare Officer  
Subarnapur

## **Format**

**Name of the activity:** \_\_\_\_\_

1. Name of the SHG: \_\_\_\_\_
2. SHG Address: Village \_\_\_\_\_ Post Office \_\_\_\_\_  
GP \_\_\_\_\_ Block \_\_\_\_\_  
District \_\_\_\_\_ PIN \_\_\_\_\_  
ICDS Project \_\_\_\_\_
3. Year of Formation: \_\_\_\_\_
4. Present livelihood activities undertaking: \_\_\_\_\_
5. Name of village where the activity will be taken up: \_\_\_\_\_
6. Whether SHG has meet the specific criteria on the corresponding livelihood activity as mentioned in the Joint Guidelines (Guidelines issued by PR&DW Department) (Yes/No)  
  
If Yes, please mention the details:
  7. Bank and Branch Name: \_\_\_\_\_
  8. Funds available in the Savings Bank Account: \_\_\_\_\_
    - a. Regular Saving (Yes/ No)
    - b. Amount of savings (in Rs.):
    - 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):
10. Contact No: \_\_\_\_\_
11. Resolution of the SHG to take up the activity is enclosed (Yes / No):

Name &Signature of the Authorised Person of the SHG

Date:

**Acknowledgement**

Received the Expression of Interest from \_\_\_\_\_ SHG, Village \_\_\_\_\_, on  
date \_\_\_\_\_ for the scheme titled '.....'.

Signature of the CDPO / Authorised Signatory

- 1. Name of village where the activity will be taken up
- 2. Name of SHG
- 3. Name of bank
- 4. Name of branch
- 5. Name of account
- 6. Amount of saving (in Rs.)
- 7. Regular saving (Yes/No)
- 8. Mode of contribution (Regular/Other)
- 9. Whether own labor (Yes/No) If yes, number of times per week
- 10. Method of contribution (Regular/Other)
- 11. Method Regular mentioned (Yes/No)
- 12. Cash flow mentioned (Yes/No)
- 13. District No.
- 14. Resolution of the SHG in favor of the activity

Signature of the Authorised Signatory of the SHG  
Date