

OFFICE OF THE COLLECTOR & DISTRICT MAGISTRATE, DEOGARH.
(SOCIAL WELFARE SECTION)

Letter No. 80/MS

Date. 04-05-2022

Advertisement for Taking up Different farm Based or Off-Farm Based Livelihood Clusters Under "Mission Jeevika" in Respect of ITDA Tileibani Under ST&SC Development Department Deppt. Govt. of Odisha.

Interested WSHGs/WSHG Federations/ PGs of WSHG having willingness and aptitude to Implementing different farm based and off farm based livelihood clusters under Mission Jeevika" As per the guidelines communicated by Government (Annexure II) run by ST & SC Development Department is invited to submit their proposal before concerned CDPO in the mentioned below format within 15 (fifteen) days of this notice i.e., by 18/05/2022. SHGs should be from the Tileibani Block where they propose to take up the activity.

Enclosure: 1. List of Activity and Target for the FY 2022-23.

1. SHG Selection Criteria (Annexure - I)
2. Application Format (Annexure - II)

NB: The applicant SHG can get the detailed information on the scheme from the concerned ITDAs/BPC, Mission Shakti of the Tileibani Block.

Room 4-5-22
District Social Welfare Officer,
Deogarh
D.S.W.O. Deogarh

Memo No. 81/MS

Dt.04-05-2022

Copy forwarded to BDO Tileibani, CDPO Tileibani, BPM Tileibani, BAO Tileibani, BVO Tileibani, AHO Tileibani WEO Tileibani District for information & they are requested to display the Publication of EOI at the offices of the Concerned CDPOs, BDOs, Municipalities, AWCs and BLFs for wide publicity.

Room 4-5-22
District Social Welfare Officer,
Deogarh
D.S.W.O. Deogarh

Memo No. 82/MS

Dt.04-05-2022:

Copy forwarded to the ITDA, Deogarh for information & requested to display the Publication of EOI in the Office notice board for wide publicity.

Room 4-5-22
District Social Welfare Officer,
Deogarh
D.S.W.O. Deogarh

Memo No. 83/MS

Dt.04-05-2022

Copy to NIC, Deogarh for kind information & request to publish this EOI for minimum for 15 (Fifteen) days in District website starting on/ Before 04-05-2022 positively.

Room 4-5-22
District Social Welfare Officer,
Deogarh
D.S.W.O. Deogarh

Sl No	Name of the component	Name of The Activity	No of Beneficiaries to be Covered (WSHGs)
1	Assistance to WSHGs	Mushroom Cultivation	7 SHGs
2	Farm Mechanization	Installation of Pump Set	2 SHGs
3	Farm Mechanization	Power Weeder	2 SHGs
4	Assistance to WSHGs	Jackfruit Processing Unit	1 SHG

Annexure-I

Criteria for Identification and Selection of SHGs

1. SHGs for these proposed interventions include SHG federations and PGs of SHGs.
2. SHG must have completed one year from the date of formation.
3. SHG having more than 60% Scheduled Tribes members. The project provisioning will be restricted to only Scheduled Tribes members of the SHG.
4. SHG should belong to the same block where they propose to take up the activity.
5. SHG must have an active bank account.
6. SHG must not be a bank loan defaulter
7. SHG must have undertaken regular and systematic book keeping including maintenance of meeting register, cash book , updated passbook among others.
8. SHGs being part of any Producer Groups (PGs) under tacking Farm/Non-farm based activities under Mission Jeevika programme will be given preference from the applicant SHGs/Federations.

Revised
4-5-22

Application Form —

EOI for taking up the activity: _____

1. Name of the SHG _____

2. SHG Address: _____

Village. _____ Post Office. _____

GP. _____ Block. _____

District. _____ Pin. _____

ICDS Project. _____

3. Year of Formation: _____

4. Name of village/GP where the activity will be taken up: _____

5. Whether the SHG is involved in tailoring activity (Yes/No) (Self-denigration of SHG shall be attached)

6. Bank and Branch Name: _____

7. Funds available in the saving bank Account: _____

a) Regular saving (Yes/No):

b) Amount of saving (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):

8. Contact No: _____

9. Resolution of the SHG to take up the activity is enclosed (Yes/No): —

Name & Signature of the Authorized
Person of the SHG

Date:

AcknowledgementReceived the Expression of Interest from _____ SHG, Village:
_____, on date _____ for the activity different farm based and off farm
based livelihood clusters run by ST & SC Development Department'.Signature of the CDPO/ Authorised Signatory
DateRoom
4-5-22

Enclosed With Application Form

1. Xerox copy of 1st resolution of SHG.
2. Xerox copy of Last resolution of SHG.
3. Xerox copy of front page of bank passbook of SHG.
4. Xerox copy of updated bank passbook of SHG.
5. Xerox copy of updated cashbook of SHG.
6. Original Form of Gradation.
7. Group Photo

Room
A-522