

PROFORMA OF APPLICATION

APPLICATION FOR GRANT OF VOLUNTARY S.E.T SCHEME FOR LEPROSY ERADICATION IN
URBAN/RURAL AREAS FOR THE YEAR 97 – 98

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- i) Name of the Vol. Organisation : SADHANA, Urban Leprosy Eradication
Programme and Rural Development
Project.
- ii) Full mailing address : H.O.1-2-597/26/A,
Lower Tank Bund Road,
Domalguda, Hyderabad – 29.
Branch: Godavarikhani, Karimnagar Dt., A.P.
- iii) Date of Establishment of the Vol. Organisation of SET work : 2110/90, in June, 1990
- iv) Year of Grant : 1997.98 SET Grant
- v) Total No. and Names of SET Centres run by the Organisation : 8 SET Centres (Names Enclosed)
21 Drug Delivery Points
2. i) No. Date of Registration under the society Act. (Documentary evidence registration in the first application to be given) : Already submitted
- ii) The Contribution of the Governing body of the Organisation indicating the names or representative of the District Magistrate and the Civil Surgeon taken on the Committee to oversees the Work and expenditure of the Organisation. : Already submitted
3. i) Name and location of the Clinics / Sub-centres (22 wards In 18 DDP) : Godavarikhani 22/6 Sub-cent
Jagitial 1/1 Sub-cent.
Metpalli 1/1 Sub-cent.
Korutla 1/1 Sub-cent.
- ii) Population covered along with prevalence rate of Leprosy disease (a list of the Village along with their Population as per latest census proposed to be covered under the SET scheme and prevalence rate of Leprosy New application only. : List enclosed.

iii) A certificate from State Leprosy Officer to the effect that the area proposed to be covered by Voluntary Organisation has been authorised by State Government to approve and no ever happening with earliest coverage by any Other organisation will happen (for new application only)	:	Submitted earlier		
Details of the Staff engaged As per appendix attached)	:	Appendex enclosed		
Brief remark by the inspecting Authority.				
a) State District Leprosy Officer b) Central.	:	Inspection notes of DLO enclosed		
i) Grant received from State Govt. during previous year, if so.	:	No.(Not applied for SET)		
ii) Grant received from their Ministries of the Central Govt. during the previous year, if so.				
a) Amount received	:	NIL		
b) Purpose for which spent	:	Not applicable		
7. Foreign donation received during Previous year, if so.				
a) Amount received Rupees	:	NIL		
b) Purpose for which spent	:	NIL		
8. Account of funds acquired locally				
i) Local Donation (Contribution public and members)	:	Rs.52,500/-		
ii) Earning of the Centre from Agriculture cottage industry etc. (From soap Industry)	:	-----		
a) Amount earned Rupees	:	-----		
b) Purpose for which spent	:	-----		
9. I) Balance of money on the date of Submission of application (Audited statement attached)	:	Rs.614.50 as on 01-04-97		
II) Amount of grant applied for 96-97				
a) Recurring	:	Rs.2,57,130/-		
b) Non-recurring	:	Rs. NIL		
10. Figures for previous year				
a) Total No. of patients under Treatment.	:	MB 47	PB 251	TOTAL 298
b) No. of patients who actually took treatment	:	42	246	288

- c) No. of active and complicated cases treated in the previous year : -----
- d) No. of beds maintained for the S.E.T. work : ----NIL----
- e) No. of Leprosy patients admitted in these beds. : ----NIL----
- f) An under taking that the Organisation will participate in S.E.T Scheme for a period of not less that five years. : Submitted earlier
12. Whether through case-detection in the area, regular and proper treatment of patients along with their clinical and bacteriological assessment and Health Educational and Welfare activities are under taken. : Yes, under taken as per guidelines of N.L.E.P.
13. Whether monthly and quarterly performance reports in the approved programme of the NLEP are Central / Dt.G.B.S. : Yes
14. Specify retirement benefits if any, arranged for the different categories of staff and the manner in which the funds have been kept in deposit or reserve. : NIL

Place: Godavarkhani.

Signature
of the Secretary of the
Vol. Organisation with Office Seal