



आयुष मंत्रालय  
Ministry of Ayush

Ministry of Ayush  
User Manual for  
Frontend User  
Version 1.2



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Table of Contents...

|  |           |
|--|-----------|
| <b>1 Preface .....</b>   | <b>8</b>  |
| <b>2 Intended Audience .....</b>   | <b>9</b>  |
| <b>3 Registration .....</b>  | <b>10</b> |
| <b>4 Login .....</b>   | <b>16</b> |
| <b>5 Dashboard .....</b>   | <b>18</b> |
| <b>6 Edit Profile .....</b>  | <b>19</b> |
| <b>7 Process Flow .....</b>  | <b>23</b> |
| <b>8 Schemes .....</b>   | <b>24</b> |
| 8.1 Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush .....   | 26        |
| 8.1.1 Application for grant of financial assistance for organizing seminar/conference/symposium/workshop/meetings on Ayush .....                           | 27        |
| 8.1.1.1 Details of Organization .....  | 27        |
| 8.1.1.2 Seminar / Conference etc. Details .....  | 29        |
| 8.1.1.3 Delegate Details .....   | 31        |
| 8.1.1.4 Expenditure Details .....  | 32        |
| 8.1.1.5 Details of grant requested / received from agencies like Govt. of India, state Govt. UGC, INSA, DST, CSIR, and ICAR for the proposed seminar ..... | 33        |
| 8.1.1.6 Income from participants .....   | 34        |
| 8.1.1.7 Authority Details .....  | 34        |
| 8.1.1.8 Attachments .....  | 35        |
| 8.1.2 View Applications .....  | 37        |
| 8.1.3 Download application .....   | 38        |
| 8.2 Application for organizing national/state arogya fair/Ayurveda parv/yoga fest/exhibition mela/incentive to Ayush industries .....                      | 39        |
| 8.2.1 Details of the Organization .....  | 39        |
| 8.2.2 Event details .....  | 40        |
| 8.2.3 Attachments .....  | 42        |
| 8.2.4 View Applications .....  | 44        |
| 8.2.5 Download application .....   | 45        |



|         |  |    |
|---------|--|----|
| 8.3     | Central Sector Scheme for AYURGYAN.....  | 46 |
| 8.3.1   | Capacity Building & CME in Ayush.....  | 46 |
| 8.3.1.1 | Details of the Organization .....  | 46 |
| 8.3.1.2 | Project Details .....  | 48 |
| 8.3.1.3 | Attachments.....   | 50 |
| 8.3.2   | View Applications .....  | 52 |
| 8.3.3   | Download application.....  | 53 |
| 8.3.4   | Research & Innovation in Ayush (erstwhile EMR Scheme).....   | 54 |
| 8.3.4.1 | Details of the Organization .....  | 54 |
| 8.3.4.2 | Research Project Details .....   | 55 |
| 8.3.4.3 | Attachments.....   | 60 |
| 8.3.5   | View Applications .....  | 61 |
| 8.3.6   | Download application.....  | 62 |
| 8.4     | Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush.....   | 63 |
| 8.4.1   | Component 3(A) (b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc.....                               | 65 |
| 8.4.1.1 | Personal Details.....  | 65 |
| 8.4.1.2 | Details of Presentation .....  | 67 |
| 8.4.1.3 | Attachments.....   | 68 |
| 8.4.2   | View Applications .....  | 69 |
| 8.5     | Component 3(C) (v): Application for organization of International Conference/Seminar/Symposium/Workshop etc.....   | 73 |
| 8.5.1   | Details of the Organization .....  | 74 |
| 8.5.2   | Project Details .....  | 75 |
| 8.5.3   | Attachments.....   | 77 |
| 8.5.4   | View Applications .....  | 80 |
| 8.5.5   | Download application.....  | 81 |
| 8.6     | Component 3(B) (a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH ..... | 82 |
| 8.6.1   | Details of the Organization .....  | 82 |
| 8.6.2   | Project Details .....  | 84 |
| 8.6.3   | Attachments.....   | 86 |
| 8.6.4   | View Applications .....  | 88 |
| 8.6.5   | Download application.....  | 89 |



|  |     |
|--|-----|
| 8.7 Component 3(C) (iv): Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc.... | 90  |
| 8.7.1 Details of the Organization .....  | 90  |
| 8.7.2 Project Details .....  | 91  |
| 8.7.3 Attachments.....   | 93  |
| 8.7.4 View Applications .....  | 95  |
| 8.7.5 Download application.....  | 96  |
| 8.8 Component 3(B) (b): Application for Market authorization of AYUSH products at regulatory bodies of different countries .....   | 97  |
| 8.8.1 Details of the Organization .....  | 97  |
| 8.8.2 Project Details .....  | 98  |
| 8.8.3 Attachments.....   | 100 |
| 8.8.4 View Applications .....  | 102 |
| 8.8.5 Download application.....  | 103 |
| 8.9 Central Sector Scheme for AYURSWASTHYA .....   | 104 |
| 8.9.1 Up-gradation of Specialities to Centre of Excellence under AYURSWASTHYA YOJANA ..  | 105 |
| 8.9.1.1 Details of the Organization .....  | 105 |
| 8.9.1.2 Project Details .....  | 107 |
| 8.9.1.3 Attachments.....   | 109 |
| 8.9.1.4 View Applications .....  | 114 |
| 8.9.1.5 Download application.....  | 115 |
| 8.9.2 AYUSH and Public Health (PHI)/ AYUSH and Sports Medicine under AYURSWASTHYA YOJANA .....   | 116 |
| 8.9.2.1 Details of the Organization .....  | 116 |
| 8.9.2.2 Project Details .....  | 118 |
| 8.9.2.3 Attachments.....   | 121 |
| 8.9.2.4 View Applications .....  | 123 |
| 8.9.2.5 Download application.....  | 124 |
| 8.10 Central Sector Scheme on Conservation, Development and Sustainable Management of Medicinal Plants.....  | 125 |
| 8.10.1 Short Names for scheme.....   | 125 |
| 8.10.2 Research & Development .....  | 126 |
| 8.10.2.1 Organization Details.....   | 126 |
| 8.10.2.2 Project Details.....  | 127 |



|          |  |     |
|----------|--|-----|
| 8.10.2.3 | Attachments .....  | 134 |
| 8.10.2.4 | View Applications .....  | 136 |
| 8.10.2.5 | Download application .....   | 137 |
| 8.10.3   | IEC & Training .....   | 138 |
| 8.10.3.1 | Details of the Organization.....   | 138 |
| 8.10.3.2 | Project Details.....   | 139 |
| 8.10.3.3 | Attachments .....  | 143 |
| 8.10.3.4 | View Applications .....  | 145 |
| 8.10.3.5 | Download application .....   | 146 |
| 8.10.4   | Conservations.....   | 147 |
| 8.10.4.1 | Organization Details.....  | 147 |
| 8.10.4.2 | Project Details.....   | 148 |
| 8.10.4.3 | Attachments .....  | 154 |
| 8.10.4.4 | View Applications .....  | 155 |
| 8.10.4.5 | Download application .....   | 156 |
| 8.10.5   | Marketing & Trade.....   | 157 |
| 8.10.5.1 | Details of the Organization.....   | 157 |
| 8.10.5.2 | Project Details.....   | 158 |
| 8.10.5.3 | Attachments .....  | 163 |
| 8.10.5.4 | View Application.....  | 165 |
| 8.10.5.5 | Download application .....   | 166 |
| 8.10.6   | Herbal Garden .....  | 167 |
| 8.10.6.1 | Details of the Organization.....   | 167 |
| 8.10.6.2 | Project Details.....   | 168 |
| 8.10.6.3 | Attachments .....  | 173 |
| 8.10.6.4 | View Applications .....  | 175 |
| 8.10.6.5 | Download application .....   | 176 |
| 8.10.7   | Other Promotional Activities (QPM/Nursery/Germ Plasm).....                     | 177 |
| 8.10.7.1 | Organization Details.....  | 177 |
| 8.10.7.2 | Project Details:.....  | 178 |
| 8.10.7.3 | Attachments .....  | 184 |
| 8.10.7.4 | View Applications .....  | 186 |
| 8.10.7.5 | Download application .....   | 187 |
| 8.11     | Central Sector Scheme of Champion Service Sector Scheme for Medical Value..... | 188 |



|  |            |
|--|------------|
| 8.11.1 Central Sector Scheme for Establishment of Ayush Super Specialty Hospitals/ Day Care Center ..... | 189        |
| 8.11.1.1 Details of the Organization.....  | 189        |
| 8.11.1.2 Project Details.....  | 190        |
| 8.11.1.3 Attachments .....   | 194        |
| 8.11.1.4 View Applications .....   | 197        |
| 8.11.1.5 Download application .....  | 198        |
| 8.11.2 Central sector scheme for skill development under Champion services Sector scheme                 | 199        |
| 8.11.2.1 Details of the Organization.....  | 199        |
| 8.11.2.2 Project Details.....  | 201        |
| 8.11.2.3 Attachments .....   | 204        |
| 8.11.2.4 View Applications .....   | 207        |
| 8.11.2.5 Download application .....  | 208        |
| <b>9 My Application .....</b>  | <b>209</b> |
| 9.1 View Application .....   | 210        |
| <b>10 Change Password .....</b>  | <b>211</b> |
| <b>11 Logout .....</b>   | <b>213</b> |



## 1 Preface

The Ministry has developed this portal for digitalization of various processes involved in all Central Sector Schemes of the Ministry. Interested organizations/ individuals are required to apply and submit their proposal through this portal for funding from related Central Sector Scheme of the Ministry. This portal is integrated with NGO Darpan portal of the Niti Aayog and hence NGOs registered on NGO Darpan portal can only apply. After receipt of proposal to release of grant/ funding, all major steps involved will be completed through this portal.





## 2 Intended Audience

This User Manual is exclusively developed for the use of Frontend User. It explains the process of schemes and application.

Care is taken to explain each function in detail!



### 3 Registration

Government organizations, private organizations, non-profit non-Govt. organizations, individual, and autonomous body can register into Ayush NGO portal to get payment and release fund for the event from government.

Click [Register Now](#) to register into Ayush NGO portal.

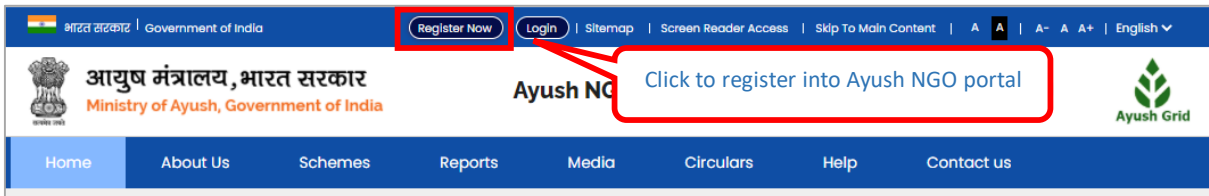


Figure 3-1

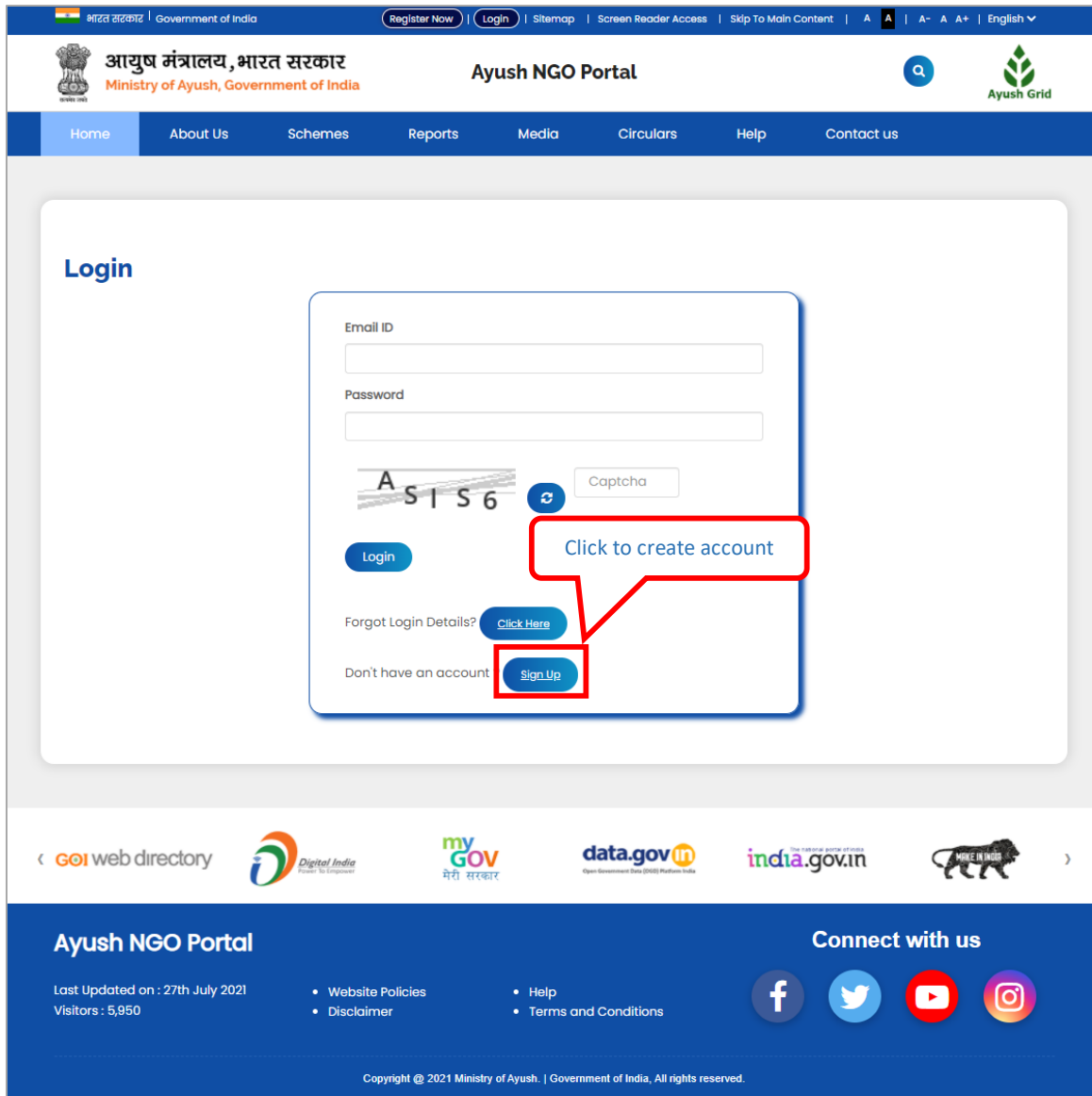


Figure 3-2



Click [Sign Up](#) to register into Ayush NGO portal

### Register

Organization Type\*

Select Organization Type

- Select Organization Type
- Govt. Organisations
- Private Organisations
- Non-Profit Non-Govt. Organisations
- Individual
- Autonomous Body

Sub Organization Type\*

Select Sub Organization Type

Last Name\*

Registration Number\*

Contact Number\*

Select Country\*

India

Select State\*

Select

Select District\*

Select an Option

Address\*

Pincode\*

Mobile Number\*

Email\*

Send OTP

Figure 3-3

Relevant Upload, if any\*

Choose File No file chosen

Allowed pdf,jpg,jpeg,doc,docx,png formats.  
Optimal Size : 1MB

Bank Account Details

Name as per the bank account\*

Account Number\*

Bank Name\*

Branch Name\*

IFSC Code\*

MICR Code\*

5 3 L 5 L pcha

Register Cancel

Already Registered ? Click Here To [Login](#)

Click to register into Ayush NGO portal

Click to discard changes

Click to go back to login page changes

Figure 3-4



### Enter following details:

- Organization Type: Select organization type from dropdown

If frontend user selects;

- Private Organization
- Non-Profit,
- Non-Government Organizations Or Autonomous Body,
- User needs to enter Registration Number and select registration date from calendar
- Sub Organization Type: Select sub organization type from dropdown

For Govt. organization, user can select following sub organization type:

**Register**

Organization Type\*  
Govt. Organisations

Sub Organization Type\*  
Select  
Govt. Aided Institutions  
Govt. Organisations  
Govt. Undertakings  
Govt. Hospitals  
Govt. Universities

First Name\*  
[Input Field]

Organization Name\*  
[Input Field]

Select Country\*  
India

Select District\*  
Select an Option

Pincode\*  
[Input Field]

Address\*  
[Input Field]

Mobile Number\*  
[Input Field]

Figure 3-5

For Private Organizations, user can select following sub organization type:

**Register**

Organization Type\*  
Private Organisations

Sub Organization Type\*  
Select  
Private Institutions  
Private Organisations  
Private Undertakings  
Private Hospitals  
Private Universities  
Investors  
Small and Medium Enterprises

First Name\*  
[Input Field]

Organization Name\*  
[Input Field]

Registration Date\*  
[Calendar]

Select Country\*  
India

Select District\*  
Select an Option

Address\*  
[Input Field]

Mobile Number\*  
[Input Field]

Figure 3-6



For Non-Profit Non-Govt. Organizations, user can select following sub organization type:

**Register**

Organization Type\*  
Non-Profit Non-Govt. Organisations

Sub Organization Type\*  
Select  
Non-Govt. Organisations  
Non-Profit Organisations

First Name\*  
[Text Field]

Organization Name\*  
[Text Field]

Registration Date\*  
[Text Field]

Contact Number\*  
[Text Field]

Select Country\*  
India

Select State\*  
Select

Select District\*  
Select an Option

Address\*  
[Text Field]

Figure 3-7

For Individuals, user can select following sub organization type:

**Register**

Organization Type\*  
Individual

Sub Organization Type\*  
Select  
Individual

First Name\*  
[Text Field]

Contact Number\*  
[Text Field]

Select State\*  
Select

Select District\*  
Select an Option

Address\*  
[Text Field]

Figure 3-8



For Autonomous Body, user can select following sub organization type:

The screenshot shows a registration form titled "Register". On the left side, there are several input fields: "Organization Type\*" (dropdown menu with "Autonomous Body" selected), "First Name\*", "Organization Name\*", "Registration Date\*" (calendar icon), "Select Country\*" (dropdown menu with "India" selected), and "Select District\*" (dropdown menu with "Select an Option" selected). On the right side, there are: "Sub Organization Type\*" (dropdown menu open with "Autonomous Body" selected), "Registration Number\*" (input field), "Contact Number\*" (input field), "Select State\*" (dropdown menu with "Select" selected), and "Address\*" (input field). A red box highlights the "Sub Organization Type" dropdown menu.

Figure 3-9

- First Name: Enter first name
- Last Name: Enter last name
- Organization Name: Enter organization name
- Registration Number: Enter registration number
- Registration Date: Enter registration date
- Contact Number: Enter contact number
- Select Country: Select country from dropdown
- Select State: Select state from dropdown
- Select District: Select district from dropdown
- Address: Enter address
- Pincode: Enter pincode
- Mobile Number: Enter mobile number
- Email: Enter email
- Click **Send OTP** to send OT P in email
- OTP: Enter OTP
- Click **Verify OTP** to verify OTP
- Relevant document, if any
- Click **Choose File** to upload document
- Head of the Organization: Enter head of organization
- Address: Enter address
- Organization Contact Number: Enter organization contact number
- Email ID: Enter email ID
- Programme Coordinator: Enter programme coordinator
- Contact Number: Enter contact number
- Email ID: Enter email ID



- Name as per the bank account: Enter name as per the bank account
- Account Number: Enter account number
- Bank Name: Enter bank name
- Branch Name: Enter branch name
- IFSC Code: Enter IFSC code
- MICR Code: Enter MICR code
- Enter CAPTCHA as display
- Click [Register](#) to register into Ayush NGO portal
- Click [Cancel](#) to discard changes
- Click [Login](#) to go back to login page

**Note:** After Registration, frontend user can login to portal and apply for various schemes. In case, if you are PMU, Expert, PAC, or PSC user, you can approve, scrutinize, reject or review the application you have received.



## 4 Login

Once the registration is successfully completed, frontend user will get confirmation email on registered email ID containing username and password for login.

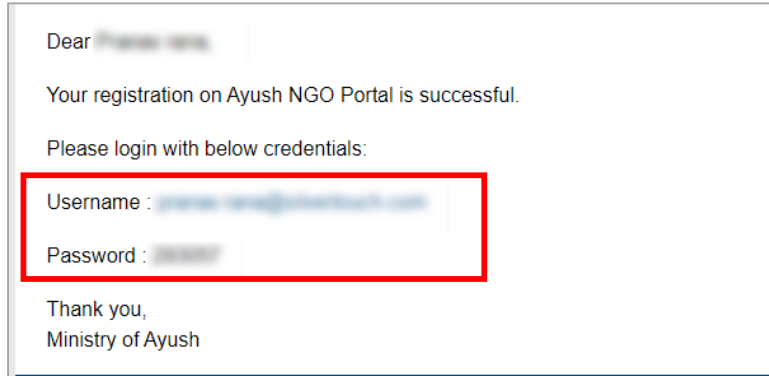


Figure 4-1



Figure 4-2





**Enter following details:**

- Email: Enter email ID
- Password: Enter password
- Captcha: Enter CAPTCHA code as displayed
- Click [Login](#) to sign in
- Click [Click Here](#) in case of forgotten password
- In case if you have not registered on the portal you can register by selecting [Sign Up](#) button on login screen



## 5 Dashboard

When frontend user login to Ayush NGO portal, user will be redirected to dashboard.

This dashboard displays various cards for total applications, total applications that are pending for approval, total applications that are in clarification, total applications that are approved, and total applications that are rejected.

When frontend user login with non-profit non non-govt. organisation, following dashboard will be displayed::

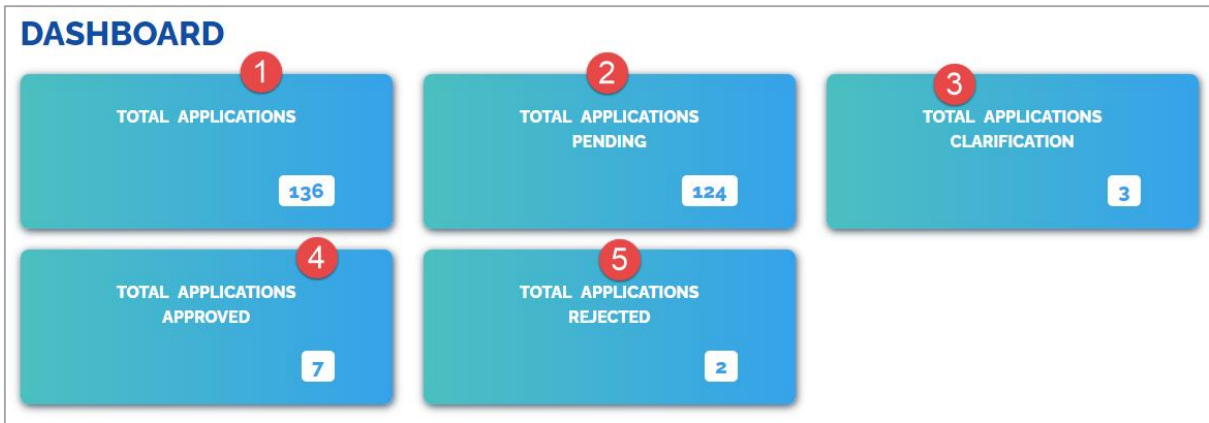



Figure 5-1

|  |  |
|--|--|
|  | Displays total applications                |
|  | Displays total applications pending        |
|  | Displays total applications clarifications |
|  | Displays total application approved        |
|  | Displays total applications rejected       |



## 6 Edit Profile

Click  to edit profile

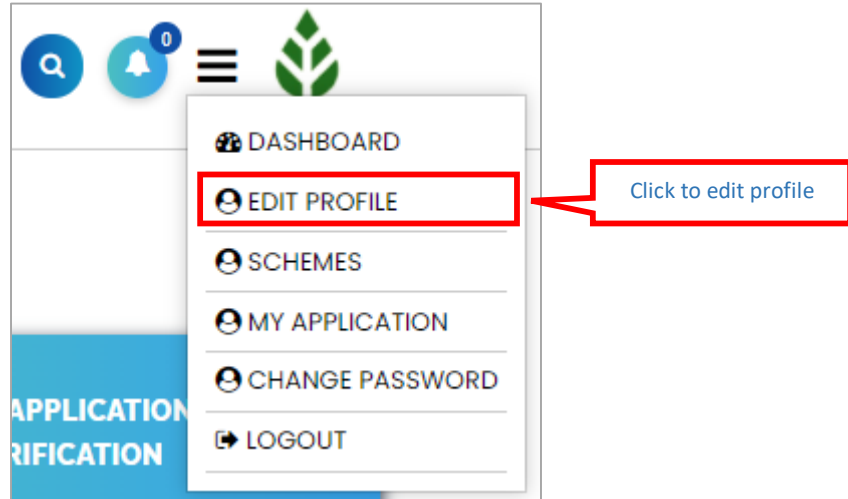


Figure 6-1



### Edit Profile

|   |  |
|---|--|
| <b>Organization Type*</b><br>Non-Profit Non-Govt. Organisations | <b>Sub Organization Type*</b><br>Non-Govt. Organisations   |
| <b>Select Country*</b><br>India                                 | <b>Select State*</b><br>GUJARAT  |
| <b>Select District*</b><br>AHMADABAD                            | <b>First Name*</b><br>Praful   |
| <b>Last Name*</b><br>Jansari                                    | <b>Organization Name*</b><br>Bhawana Sewa Sansthan   |
| <b>NGO Type*</b><br>3   | <b>Registered with*</b><br>2   |
| <b>Key Contact Name*</b><br>shikha Jain                         | <b>Key Contact Designation*</b><br>President   |
| <b>Registration Number*</b><br>925/2003-04                      | <b>Registration Date*</b><br>09-01-2004  |
| <b>Contact Number*</b><br>9090909090                            | <b>Address*</b><br>417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow<br>226003   |
| <b>Mobile</b><br>9090909090                                     | <b>Email</b><br>praful.jansari@silvertouch.com   |
| <b>Pincode*</b><br>226003                                       | <b>Relevant document, if any</b><br>Choose File No file chosen<br><small>Allowed pdf,jpg,jpeg,doc,docx,png formats.<br/>Optimal Size : 1MB</small> |
| <b>Organization Details</b>                                     |  |
| <b>Head of the Organization*</b><br>test                        | <b>Address*</b><br>tes   |
| <b>Organization Contact Number*</b><br>9090909909               | <b>Email ID*</b><br>praful.jansari@silvertouch.com   |
| <b>Project Details</b>  |  |
| <b>Programme Coordinator*</b><br>test                           | <b>Contact Number*</b><br>9090909090   |
| <b>Email ID*</b><br>praful.jansari@silvertouch.com              |  |
| <b>Bank Account Details</b>                                     |  |
| <b>Name as per the bank account*</b>                            | <b>Account Number*</b><br>909009090909090909   |
| <b>Bank Name*</b><br>test                                       | <b>Branch Name*</b><br>test  |
| <b>IFSC Code*</b><br>test                                       | <b>MICR Code*</b><br>test  |

**Submit** **Cancel**

Click to save changes

Click to discard changes

Figure 6-2



**Enter following details:**

- Organization Type: Select organization type from dropdown
- Select Organization Type: Select organization type from dropdown
- Non-Profit Non-Govt. Organisations
- Select Country: Select country from dropdown
- Select State: It cannot be editable as it in disable mode and comes at the time registration information filled by fronted user
- Select District: It cannot be editable as it in disable mode and comes at the time registration information filled by fronted user
- First Name: Enter first name
- Last name: Enter last name
- Organization Name
- NGO Type, frontend
- Registered with
- Key Contact Name
- Key Contact Designation
- Registration Number
- Registration Date: Select registration date from calendar
- Contact Number: Enter contact number
- Address: It cannot be editable as it in disable mode and comes at the time registration information filled by fronted user
- Mobile will be displayed automatically
- Email will be displayed automatically
- Pincode: Enter pincode
- Relevant document, if any
- Click  to upload file
- Head of the Organization: Enter head of the organization
- Address: It cannot be editable as it in disable mode and comes at the time registration information filled by fronted user
- Organization Contact Number: Enter organization contact number
- Email ID: Enter email address
- Programme Coordinator: Enter programme coordinator
- Contact Number: Enter contact number
- Email ID: Enter email address
- Name as per the bank account: Enter name as per the bank account
- Account Number: Enter account number
- Bank Name: Enter bank name
- Branch Name: Enter branch name
- IFSC Code: Enter IFSC code
- MICR Code: Enter MICR code
- Click  to save changes
- Click  to discard changes



Note: Following are details that cannot be edit by user as these details are already been fetched from NGO Darpan Portal:

- Organization Name
- NGO Type, frontend
- Registered with
- Key Contact Name
- Key Contact Designation
- Registration Number

If the user is Ngo, then that user cannot enter following details:

- State
- District
- Address



## 7 Process Flow

### **Central Sector Scheme for upgradation to centre of excellence (CoE)**

- First installment is transferred once the application is approved

### **Central Sector Scheme For Promotion Of Ayush Intervention In Public Health Initiatives (PHI)**

- First installment is transferred once the application is approved

### **Central Sector Scheme For Continuing Medical Education (CME)**

- First installment is transferred once the application is approved

### **Scheme For Extra Mural Research (EMR)**

- First installment is transferred once the application is approved

### **Central Sector Scheme on Conservation, Development and Sustainable Management of Medicinal Plants**

- Fund/Installment is transferred post submission/approval of monitoring parameters

### **Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush**

- Fund/Installment is transferred post submission/approval of monitoring parameters

### **Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush**

- First installment is transferred once the application is approved

### **Central Sector Scheme of Champion Service Sector Scheme for Medical Value**

- Fund/Installment is transferred post submission/approval of monitoring parameters



## 8 Schemes

Click  to view schemes

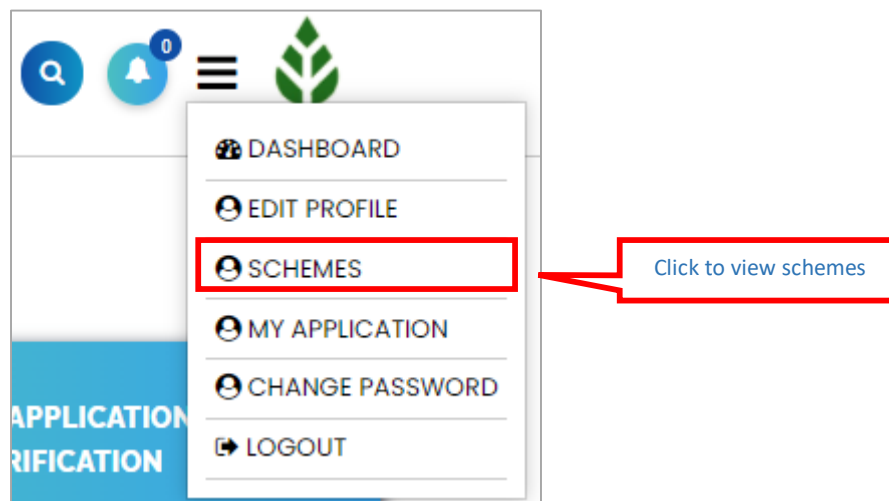


Figure 8-1

**Frontend user can apply for following schemes:**

- Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush
- Application for grant of financial assistance for organizing seminar/conference/symposium/workshop/meetings on Ayush
- Application for organizing national/state arogya fair/Ayurveda parv/yoga fest/exhibition mela/incentive to Ayush industries
- Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush
- Component 3(A) (b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc.
- Component 3(B) (a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH
- Component 3(B) (b): Application for Market authorization of AYUSH products at regulatory bodies of different countries
- Component 3(C) (v): Application for organization of International Conference/Seminar/Symposium/Workshop etc.
- Component 3(C) (iv): Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc.
- Central Sector Scheme on Conservation, Development and Sustainable Management of Medicinal Plants
- Research & Development
- Conservations
- Herbal Garden
- IEC & Training
- Marketing & Trade





- Other Promotional Activities (QPM/Nursery/Germ Plasm)
- Central Sector Scheme for AYURGYAN,
- Capacity Building & CME in Ayush
- Research & Innovation in Ayush (erstwhile EMR Scheme)
- Central Sector Scheme for AYURSWASTHYA
- Central sector scheme for upgradation to centers of excellence (COE)
- Central Sector Scheme for Promotion of Ayush Intervention in Public Health Initiatives (PHI)
- Central Sector Scheme of Champion Service Sector Scheme for Medical Value
- Central sector scheme for upgradation to centers of excellence (COE)
- Central Sector Scheme for Promotion of Ayush Intervention in Public Health Initiatives (PHI)

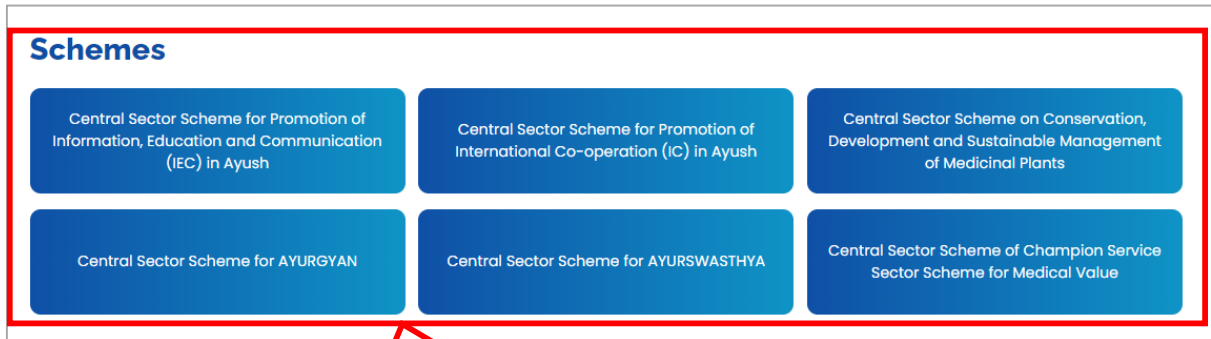


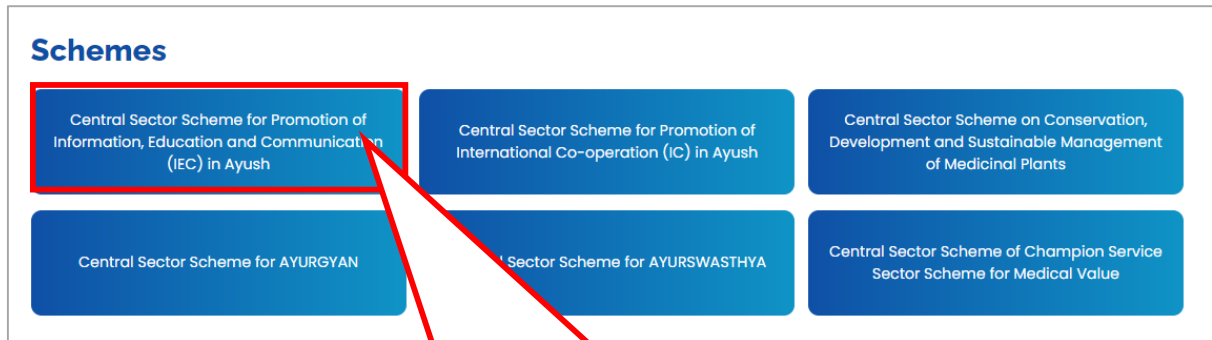
Figure 8-2

There are six schemes:

- 1) Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush
- 2) Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush
- 3) Central Sector Scheme on Conservation, Development and Sustainable Management of Medicinal Plants
- 4) Central Sector Scheme for AYURGYAN
- 5) Central Sector Scheme for AYURSWASTHYA
- 6) Central Sector Scheme of Champion Service Sector Scheme for Medical Value



## 8.1 Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush



8-3

There are two sub parts in this scheme:

- 1) Application for grant of financial assistance for organizing seminar/conference/symposium/workshop/meetings on Ayush
- 2) Application for organizing national/state Arogya fair/Ayurveda parv/yoga fest/exhibition mela/incentive to Ayush industries



8.1.1 Application for grant of financial assistance for organizing seminar/conference/symposium/workshop/meetings on Ayush

8.1.1.1 Details of Organization

**Application for grant of financial assistance for organizing seminar/conference/symposium/workshop/meetings on Ayush**

Application should be submitted 3 months before the event along with the complete details/documents

**DETAILS OF THE ORGANIZATION**

|                           |  |
|---------------------------|--|
| Name of the organization* | Address*   |
| Bhawana Sewa Sansthan     | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address*            | Mobile No*   |
|                           |  |
| Type of Applicant*        | Sub-Type of Applicant*   |
| Select Type of Applicant  | Select Sub-Type of Applicant                                       |
| Contact Number*           | Registration Number*   |
| 9090909090                | 925/2003-04  |
| Registration Date*        | Organization Status*   |
| 09-01-2004                | Non-Profit Non-Govt. Organisations                                 |
| Year of establishment*    | Registered Under Act.*   |
|                           |  |

**DETAILS OF APPLICANT'S EXPERIENCE IN LAST 3 YEARS IN THE CONCERNED FIELD**

| 1. Achievement*<br>2. description* | 1. Year*<br>2. Attachment, if any*         |   |
|------------------------------------|--|---|
| Achievement                        | Select                                     | + |
| description                        | Choose File No file chosen                 |   |
|                                    | Allowed pdf formats.<br>Optimal Size : 2MB |   |

Website of the Organization\*

www.gov.com

Click to save organization details and move to next form

Click to save organization details and submit later

Save Draft Save & Next

Figure 8-4

Enter following details:

- Name of the organization will be displayed automatically
- Address will be displayed automatically
- Email Address will be displayed automatically
- Mobile No will be displayed automatically
- Type of Applicant: Select type of applicant from dropdown
- Sub-Type of Applicant: Select type of sub-type applicant from dropdown



- Contact Number will be displayed automatically
- Registration Number will be displayed automatically
- Registration Date will be displayed automatically
- Organization Status: Select organization status from dropdown
- Year of establishment Select year of establishment from calendar
- Registered Under Act: Enter registration under act
- Achievement: Enter achievement
- Description: Enter description
- Year: Select year from dropdown
- Click  to upload file
- Website of the Organization: Enter website of organization
- Click  to save organization details and submit later
- Click  to save organization details and move to next form

Note: This application should be submitted 3 months before the event along with the complete details/documents



8.1.1.2 Seminar / Conference etc. Details

**SEMINAR / CONFERENCE ETC. DETAILS**

From Date\*

To Date\*

Place\*

Topic / Subject\*

Brief Synopsis of Topic/Subject\*

Scientific Details\*

Tentative programme of activities\*

Date\*

Scheduled Programme\*

Explain briefly as to how the subject is related to dissemination of proven results\*

In case the topic of the Seminar/Conference/Symposium/Workshop is the same as in previous years, what is your justification for holding it again\*

Received any grant in last three years?\*  
Yes  No

If the application is from an Institute/Department, provide brief details of collaboration, if any\*

[Previous](#) [Save Draft](#) [Save & Next](#)

Figure 8-5

**Enter following details:**

- From Date: Select from date from calendar
- To Date: Select to date from calendar
- Place: Enter place
- Topic / Subject: Select topic / subject from dropdown
- Brief Synopsis of Topic/Subject: Enter brief synopsis of topic/subject
- Scientific Details: Enter scientific details
- Date: Select date from calendar
- Scheduled Programme: Select Scheduled Programme date from dropdown
- Explain briefly as to how the subject is related to dissemination of proven results: Enter how the subject is related to dissemination of proven results
- In case the topic of the Seminar/Conference/Symposium/Workshop is the same as in previous years, what is your justification for holding it again: Enter justification for holding seminar/conference/ symposium/workshop
- Received any grant in last three years?: Enter received any grant in last three years?



Received any grant in last three years?\*

Yes  No

Name of Body\*

Year\*

Select Year

Grant requested\*

Grant Received\*

Letter No. \*

Letter Date\*

Item For Which Grant Asked For\*

Name of Seminar / Conference / symposium / workshop\*

If the application is from an Institute/Department, provide brief details of collaboration, if any\*

Whether U.C. Submitted\*

Yes  No

Previous Save Draft Save & Next

Figure 8-6

- If frontend user select **Yes**  radio button, then user has to enter following details:
- Name of Body: Name of Body:
- Year: Select year from dropdown
- Grant requested: Enter grant requested
- Grant Received: Select grant received
- Letter No: Enter letter number
- Letter Date: Select letter date from calendar
- Item For Which Grant Asked For: Enter item for which grant asked for
- Name of Seminar / Conference / symposium / workshop: Enter Name of Seminar / Conference / symposium / workshop
- If the application is from an Institute/Department, provide brief details of collaboration, if any: Enter If the application is from an Institute/Department, provide brief details of collaboration, if any
- Whether U.C. Submitted

Whether U.C. Submitted\*

Yes  No

Allowed pdf formats.

Click to save Seminar / Conference etc. details and move to next form

Click to save Seminar / Conference etc. details and submit later

Click to go to previous form

Previous Save Draft Save & Next

Figure 8-7

- If frontend user selects **Yes**  radio button, then user has to enter following details:



- Attachment
- Click **Choose File** to upload file
- If frontend user select **No**  radio button, then user does not have to add attachment.
- Click **Previous** to go to previous form
- Click **Save Draft** to save organization details and submit later
- Click **Save & Next** to save organization details and move to next form

### 8.1.1.3 Delegate Details

| Name of the delegate* | Whether Presenting Papers* | Topic Session* | Session Date* | Designation* | Abstract to be uploaded, if received       | +                                     |
|-----------------------|----------------------------|----------------|---------------|--------------|--|---------------------------------------|
| Name of the d         | Select                     | Topic Session  | Session Date  |              | Allowed pdf formats.<br>Optimal Size : 2MB | Click to add more details of delegate |

Structure of Seminar / Conference\*

Topic Of The Session\*

No. of Delegates TA/DA offered\*

Previous Save Draft Save & Next

Figure 8-8

#### Enter following details:

- No. of delegates expected to participate: Enter no. of delegates expected to participate
- Name of the delegate: Enter name of delegate
- Whether Presenting Papers: Select whether presenting papers Yes or No from dropdown
- Topic Session: Enter topic session
- Session Date: Select session date form calendar
- Designation: Enter designation
- Abstract to be uploaded, if received
- Click **+** to add more details of the delegates
- Structure of Seminar / Conference: Enter structure of seminar / conference
- Name of the speaker: Enter name of the speaker



- Topic of the session: Enter topic of the session
- No. of delegates TA/DA offered: Enter number of delegates TA/DA offered
- Click **Previous** to go to previous form
- Click **Save Draft** to save organization details and submit later
- Click **Save & Next** to save organization details and move to next form

#### 8.1.1.4 Expenditure Details

The screenshot shows the 'EXPENDITURE DETAILS' form. It includes a header bar with a dropdown menu labeled 'Click to add more details of'. Below this is a text input field for 'Total anticipated Expenditure\*'. The main section is titled 'HEAD WISE DETAILS' and contains a table with columns: 'Head\*', 'Amount requested from Central Govt.\*', and 'Contribution of the Organization\*'. A '+' button is located at the end of the table header. Below the table, there are three callouts: 'Click to go to previous form' pointing to the 'Previous' button, 'Click to save expenditure details and submit later' pointing to the 'Save Draft' button, and 'Click to save expenditure details and move to next form' pointing to the 'Save & Next' button. The 'Previous' button is also highlighted with a red box.

Figure 8-9

#### Enter following details:

- Total anticipated Expenditure
- Head: Enter head
- Amount requested from Central Govt.: Enter amount requested from central Govt.
- Contribution of the Organization: Enter contribution of the organization
- Click **+** to add more details of total anticipated expenditure
- Click **Previous** to go to previous form
- Click **Save Draft** to save expenditure details and submit later
- Click **Save & Next** to save expenditure details and move to next form






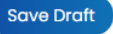
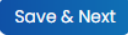




8.1.1.5 Details of grant requested / received from agencies like Govt. of India, state Govt. UGC, INSA, DST, CSIR, and ICAR for the proposed seminar

Figure 8-10

**Enter following details:**

- Name of Agency: Enter name of agency
- Grant Requested: Enter grant requested
- Grant Received: Enter grant received
- Item Name: Enter item name
- Click  to add more item name
- Whether U.C. Submitted
- If frontend user selects **Yes** , then user has to enter following details:
- Attachment
- Click  to upload file
- If frontend user select **No** , then user does not have to add attachment.
- Click  to go to previous form
- Click  to save details of grant requested / received from agencies like Govt. of India, state Govt. UGC, INSA, DST, CSIR, and ICAR for the proposed seminar and submit later
- Click  to save details of grant requested / received from agencies like Govt. of India, state Govt. UGC, INSA, DST, CSIR, and ICAR for the proposed seminar and move to next form



8.1.1.6 Income from participants

Figure 8-11

Enter following details:

- Total amount received from registration fees: Enter total amount received from registration fees
- Total amount received from other sources (except registration fees): Enter total amount received from other sources (except registration fees)
- Click **Previous** to go to previous form
- Click **Save Draft** to save details of income from participants and submit later
- Click **Save & Next** to save details of Income from participants and move to next form

8.1.1.7 Authority Details

Figure 8-12

Enter following details:

- Name of the Authority (as per point 10 of annexure 1 of IEC scheme guidelines):
- Copy of ECS / Bank Details:
- Click **Choose File** to upload file
- Copy of Agency Registration:
- Click **Choose File** to upload file
- Click **Previous** to go to previous form
- Click **Save Draft** to save details of authority and submit later
- Click **Save & Next** to save details of authority and move to next form



### 8.1.1.8 Attachments

**ATTACHMENTS**

**Copy of article of Association\*** ✔  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Bye Laws \***  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Audited statement of accounts of last 3 years\***  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

**Copy of activities and performance report of last 3 years\***  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Source of income and expenditure\***  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

**Copy of recommendation from state Ayush department\***  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

**Copy of ECS Performa\***  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

**Copy of CA fee**  
Choose File No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

[Click to go to previous form](#)

[Click to submit form details](#)

[Previous](#) [Click to save form details and submit later](#) [Save Draft](#) [Submit](#)

Figure 8-13

#### Enter following details:

- Name of the Authority (as per point 10 of annexure 1 of IEC scheme guidelines):
- Copy of article of Association:
  - Click [Choose File](#) to upload file
- Copy of Bye Laws:
  - Click [Choose File](#) to upload file
- Copy of Audited statement of accounts of last 3 years:
  - Click [Choose File](#) to upload file
- Copy of activities and performance report of last 3 years:
  - Click [Choose File](#) to upload file
- Copy of Source of income and expenditure:
  - Click [Choose File](#) to upload file
- Copy of recommendation from state Ayush department:
  - Click [Choose File](#) to upload file
- Copy of ECS Performa:



- Click  to upload file
- Copy of CA fee:
- Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

After clicking on  system will display following message:

**“Are you sure, you want to submit(Yes/No)”**

Click “Yes” to submit application.

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **[Name]**  
Your application NO. 200122/10024 has been submitted successfully for Application for grant of financial assistance for organizing seminar/conference/symposium/workshop/meetings On Ayush.  
Kindly quote your application NO. 200122/10024 in all future correspondence and keep checking status of your application on your dashboard.  
Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-14

On successful submission of form following message will be displayed:

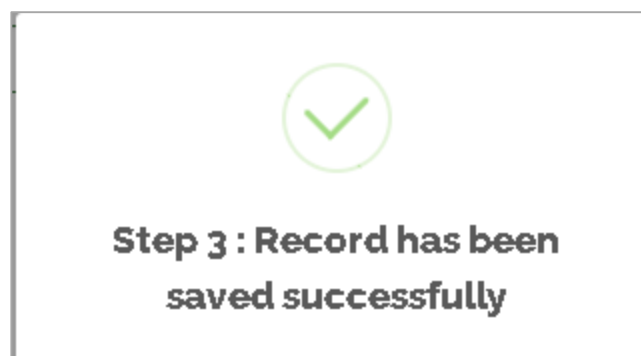


Figure 8-15



### 8.1.2 View Applications

Frontend user can search application by entering search terms in search textbox

Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush application will be displayed with following column headings:




















| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action  |
|--------|-----------------------|--------|------------------|--------------|-----------|---|
| 1      | Bhawana Sewa Sansthan | IEC-A  | 030122/100375    | 03-Jan-2022  | Draft     |       |
| 2      | Bhawana Sewa Sansthan | IEC-A  | 030122/100374    | 03-Jan-2022  | Submitted |    |
| 3      | Bhawana Sewa Sansthan | IEC-A  | 311221/100372    |              |           |       |
| 4      | Bhawana Sewa Sansthan | IEC-A  | 311221/100373    |              |           |       |
| 5      | Bhawana Sewa Sansthan | PHI    | 301221/100371    | 30-Dec-2021  | Draft     |       |
| 6      | Bhawana Sewa Sansthan | NMPB-B | 291221/100368    | 29-Dec-2021  | Draft     |    |
| 7      | Bhawana Sewa Sansthan | CME    | 291221/100366    |              |           |       |
| 8      | Bhawana Sewa Sansthan | NMPB-A | 291221/100362    | 29-Dec-2021  | Draft     |       |
| 9      | Bhawana Sewa Sansthan | NMPB-B | 241221/100356    | 24-Dec-2021  | Draft     |   |
| 10     | Bhawana Sewa Sansthan | NMPB-B | 231221/100355    | 23-Dec-2021  | Draft     |   |

Figure 8-16

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
  - Click  (details) to view application details
  - Click  (edit) to edit application details



## 8.1.3 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status | Action |
|--------|-----------------------|--------|------------------|--------------|--------|--------|
| 1      | Bhawana Sewa Sansthan | IEC-A  | 030122/100375    | 03-Jan-2022  | Draft  |        |
| 2      | Bhawana Sewa Sansthan | IEC-A  | 030122/100374    | 03-Jan-2022  | Draft  |        |
| 3      | Bhawana Sewa Sansthan | IEC-A  | 31122            |              |        |        |
| 4      | Bhawana Sewa Sansthan | IEC-A  | 31122            |              |        |        |
| 5      | Bhawana Sewa Sansthan | PHI    | 301221/100371    | 30-Dec-2021  | Draft  |        |
| 6      | Bhawana Sewa Sansthan | NMPB-B | 291221/100368    | 29-Dec-2021  | Draft  |        |
| 7      | Bhawana Sewa Sansthan | CME    | 291221/100366    | 29-Dec-2021  | Draft  |        |
| 8      | Bhawana Sewa Sansthan | NMPB-A | 291221/100362    | 29-Dec-2021  | Draft  |        |
| 9      | Bhawana Sewa Sansthan | NMPB-B | 241221/100356    | 24-Dec-2021  | Draft  |        |
| 10     | Bhawana Sewa Sansthan | NMPB-B | 231221/100355    | 23-Dec-2021  | Draft  |        |

Showing 1 to 10 of 112 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[12](#)
[Next](#)

Figure 8-17

Click to view & download application

**Application for grant of financial assistance for organizing seminar/conference/symposium/workshop/meetings on Ayush**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

|   |   |
|---|---|
| Name of the organization<br>Bhawana Sewa Sansthan | Address<br>417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address<br>prafuljansari@silvertouch.com    | Mobile No<br>9090909090   |
| Type of Applicant<br>Central Government           | Sub-Type of Applicant<br>Society  |
| Contact Number<br>9090909090                      | Registration Number<br>925/2003-04  |
| Registration Date<br>09-01-2004                   | Organization Status<br>Non-Profit Non-Govt. Organisations                     |
| Year of establishment<br>23-02-2022               | Registered Under Act.<br>2020A  |

Figure 8-18

Click [Download Pdf](#) to download application in PDF



## 8.2 Application for organizing national/state arogya fair/Ayurveda parv/yoga fest/exhibition mela/incentive to Ayush industries

### 8.2.1 Details of the Organization

#### DETAILS OF THE ORGANIZATION

|  |  |
|--|--|
| Name of the organization*  | Type of Applicant*                                   |
| Bhawana Sewa Sansthan  |  |
| Registration Number as per the company act*  | Registration Date*                                   |
| 925/2003-04  | 09-01-2004   |
| Registering Authority*   | State of registration *                              |
|  | Select State of registration                         |
| PAN Number*  | TIN Number*  |
| AAAAH3629P   |  |
| Address*   | TAN Number*  |
| 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003                 |  |
| State*   | District*  |
| GUJARAT  | AHMADABAD  |
| City*  | Pincode*   |
|  |  |
| Mobile No*   | Contact Person*                                      |
| 9090909090   |  |
| Phone Number*  |  |
| 9090909090   |  |
| Email ID*  | Unique Agency Code (if already registered with CGA)* |
|  |  |
| Name of the authority who will be responsible for submitting the invoice/vouchers* |  |
|  |  |

[Click to submit form details](#)

[Click to save form details and submit later](#)

[Save Draft](#) [Save & Next](#)

Figure 8-19

#### Enter following details:

- Name of the organization will be displayed automatically
- Type of Applicant: Enter type of applicant
- Registration Number as per the company act
- Registration Date will be displayed automatically
- Registering Authority: Enter registration authority
- State of registration: Select state of registration from dropdown
- PAN Number will be displayed automatically
- TIN Number: Enter TIN number
- Address will be displayed automatically



- TAN Number: Enter TAN number
- District: Select district from dropdown
- State: Select state from dropdown
- Pincode: Enter pincode
- City: Select city from dropdown
- Contact Person: Enter contact person name
- Mobile No will be displayed automatically
- Phone Number will be displayed automatically
- Email ID will be displayed automatically
- Unique Agency Code (if already registered with CGA): Enter unique agency code (if already registered with CGA)
- Name of the authority who will be responsible for submitting the invoice/vouchers: Enter name of the authority who will be responsible for submitting the invoice/vouchers
- Click **Save Draft** to save details of organization and submit later
- Click **Save & Next** to save details of organization and move to next form

### 8.2.2 Event details

The screenshot shows the 'EVENT DETAILS' form with the following fields and annotations:

- Event Type\***: Select Event Type (dropdown)
- Aims & Objective\***: Text area
- Has Health Melas/Exhibitions/Arogya Fairs/Parv/Utsav covered the aspect of medicinal value and the techniques for cultivation of medicinal plants, if yes provide details\***: Yes  No
- Is the Health Melas/Exhibitions/Arogya Fairs/Parv/Utsav AYUSH Health specific with a view of maximize the impact of AYUSH systems, if yes provide details\***: Yes  No
- Recommendation of the State Government\***: Yes  No
- Duration of the event(including Saturday & Sunday)\***: Text area
- NGO Darpan ID\***: UP\_2017\_0116059
- From Date\***: Text area
- To Date\***: Text area
- Venue of the event\***: Text area
- Budget Expenditure\***: Text area
- Infrastructure and Layout Plan\***: Choose File No file chosen. Allowed pdf formats.
- Website of the organizer**: https://www.examp... .com

Annotations:

- Click to go to previous form (points to Previous button)
- Click to submit form details (points to Save & Next button)
- Click to save event details and submit later (points to Save Draft button)

Figure 8-20





## Enter following details:

- Event Type: Select event type from dropdown
- Aims & Objective: Enter aims & objective
- Has Health Melas/Exhibitions/Arogya Fairs/Parv/Utsav covered the aspect of medicinal value and the techniques for cultivation of medicinal plants, if yes provide details
- If frontend user selects **Yes**  radio button, then user has to enter following details:
  - Details: enter details
- If frontend user select **No**  radio button, then user does not have to add details.
- Is the Health Melas/Exhibitions/Arogya Fairs/Parv/Utsav AYUSH Health specific with a view of maximize the impact of AYUSH systems, if yes provide details
- If frontend user selects **Yes**  radio button, then user has to enter following details:
  - Details: enter details
- If frontend user select **No**  radio button, then user does not have to add details.
- Recommendation of the State Government
- If frontend user selects **Yes**  radio button, then user has to enter following details:
  - Document:
    - Click  to upload file
  - If frontend user select **No**  radio button, then user does not have to add details.
- NGO Darpan ID will be displayed automatically
- From Date: Select from date from calendar
- To Date: Select to date from calendar
- Venue of the event: Enter venue of the event
- Budget Expenditure: Enter budget expenditure
- Infrastructure and Layout Plan
  - Click  to upload file
- Click  to go to previous form
- Click  to save event details and submit later
- Click  to save events details and move to next form



### 8.2.3 Attachments

The screenshot shows a form titled "ATTACHMENTS" with a blue header. It contains two main sections: "Status of utilization Certificate of previous event\*" and "Copy of PAN Card\*". Each section has a "Choose File" button and a "No file chosen" message. The "Status of utilization" section has radio buttons for "Yes" and "No", with "No" selected. Below the form, there are four buttons: "Previous", "Save Draft", and "Submit". Red callout boxes point to these buttons with the following text: "Click to go to previous form" (pointing to "Previous"), "Click to save form details and submit later" (pointing to "Save Draft"), and "Click to submit form details" (pointing to "Submit").

Figure 8-21

#### Enter following details:

- Status of utilization Certificate of previous event:
- If frontend user selects **Yes**  radio button, then user has to enter following details:
- Utilization Certificate:
- Click  to upload file
- If frontend user select **No**  radio button, then user does not have to add details.
- If frontend user selects  radio button, then user has to enter following details:
- Document:
- Click  to upload file
- If frontend user select  radio button, then user does not have to add details.
- Complete bank details verified by the concerned bank along with a copy of canceled cheque:
- Click  to upload file
- Copy of PAN Card:
- Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details



Once the application is successfully submitted, frontend user will receive email from respective organization

Dear [Name] [Email]  
Your application NO. 030122/100377 has been submitted successfully for Application For Grant Of Financial Assistance For Organizing Senimar/conference/symposium/workshop/meetings On Ayush.  
Kindly quote your application NO. 030122/100377 in all future correspondence and keep checking status of your application on your dashboard.  
Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-22

On successful submission of form following message will be displayed:

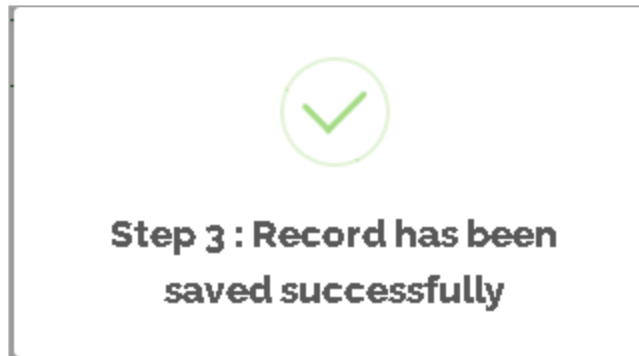


Figure 8-23



### 8.2.4 View Applications

Frontend user can search application by entering search terms in search textbox

Application for organizing national/state arogya fair/Ayurveda parv/yoga fest/exhibition mela/incentive to Ayush industries will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IEC-B  | 030122/100377    | 03-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IEC-B  | 030122/100376    | 03-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | IEC-A  | 030122/100375    | 03-Jan-2022  | Draft     |        |
| 4      | Bhawana Sewa Sansthan | IEC-A  | 030122/100374    | 31-Dec-2021  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IEC-A  | 311221/100372    | 31-Dec-2021  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IEC-A  | 311221/100373    | 31-Dec-2021  | Draft     |        |
| 7      | Bhawana Sewa Sansthan | PHI    | 301221/100371    | 30-Dec-2021  | Draft     |        |
| 8      | Bhawana Sewa Sansthan | NMPB-B | 291221/100368    | 29-Dec-2021  | Draft     |        |
| 9      | Bhawana Sewa Sansthan | CME    | 291221/100366    | 29-Dec-2021  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | NMPB-A | 291221/100362    | 29-Dec-2021  | Draft     |        |

Showing 1 to 10 of 114 entries

Previous 1 2 3 4 5 ... 12 Next

Figure 8-24

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details



## 8.2.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IEC-B  | 030122/100377    | 03-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IEC-B  | 030122/100376    | 03-Jan-2022  | Submitted |        |
| 3      | Bhawana Sewa Sansthan | IEC-A  | 030122/100375    | 03-Jan-2022  | Submitted |        |
| 4      | Bhawana Sewa Sansthan | IEC-A  | 030122/100374    | 03-Jan-2022  | Submitted |        |
| 5      | Bhawana Sewa Sansthan | IEC-A  | 311221/100372    | 31-Dec-2021  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IEC-A  | 311221/100373    | 31-Dec-2021  | Draft     |        |
| 7      | Bhawana Sewa Sansthan | PHI    | 301221/100371    | 30-Dec-2021  | Draft     |        |
| 8      | Bhawana Sewa Sansthan | NMPB-B | 291221/100368    | 29-Dec-2021  | Draft     |        |
| 9      | Bhawana Sewa Sansthan | CME    | 291221/100366    | 29-Dec-2021  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | NMPB-A | 291221/100362    | 29-Dec-2021  | Draft     |        |

Showing 1 to 10 of 114 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[12](#)
[Next](#)

Figure 8-25

Click to view & download application

**Application for organizing national/state arogya fair/Ayurveda parv/yoga fest/exhibition mela/incentive to Ayush industries**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

|  |                       |
|--|-----------------------|
| Name of the organization   | Type of Applicant     |
| Bhawana Sewa Sansthan  | aaaa                  |
| Registration Number as per the company act                         | Registration Date     |
| 925/2003-04  | 09-01-2004            |
| Registering Authority  | State of registration |
| test   | GUJARAT               |
| PAN Number   | TIN Number            |
| AAAAH3629P   | aaaa2aaaa             |
| Address  | TAN Number            |
| 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 | aaa2aaa               |

Figure 8-26

Click [Download Pdf](#) to download application in PDF



## 8.3 Central Sector Scheme for AYURGYAN

**Schemes**

- Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush
- Central Sector Scheme for AYURGYAN
- Central Sector Scheme on Conservation, Management
- Central Sector Scheme for Medical Value

There are two sub parts in this scheme: 1) Capacity Building & CME in Ayush and 2) Research & Innovation in Ayush (erstwhile EMR Scheme)

Figure 8-27

### 8.3.1 Capacity Building & CME in Ayush

#### 8.3.1.1 Details of the Organization

**Capacity Building & CME in Ayush**

**DETAILS OF THE ORGANIZATION**

Name of the organization\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Registration Number\*  
925/2003-04

Registration Date\*  
09-01-2004

Contact No.\*  
9090909090

Email Address\*

Status of permission for admission in case of AYUSH Educational Institutions during last 02 years and current year\*  
Select Status of permission for admission in case of AYUSH Edu...

Year of establishment\*

Organization Type\*  
Non-Profit Non-Govt. Organisations

PAN Number  
AAAAH3629P

TIN Number

TAN Number

NGO Darpan ID  
UP\_2017\_0116059

Click to submit form details

Click to save form details and submit later

Save Draft Save & Next

Figure 8-28

#### Enter following details:

- Name of the organization will be displayed automatically
- Address will be displayed automatically
- Registration Number will be displayed automatically
- Registration Date will be displayed automatically
- Contact No: Contact number will be displayed automatically
- Email Address: Enter email address



- Status of permission for admission in case of AYUSH Educational Institutions during last 02 years and current year: Enter status of permission for admission in case of AYUSH Educational Institutions during last 02 years and current year from dropdown
- Organization Type: Select organization type from dropdown
- PAN Number will be displayed automatically
- TIN number: Enter TIN number
- TAN Number: Enter TAN number
- NGO Darpan ID will be displayed automatically
- Click [Save Draft](#) to save details of organization and submit later
- Click [Save & Next](#) to save details of organization and move to next form



### 8.3.1.2 Project Details

PROJECT DETAILS
▼

**NAME OF THE PROGRAMMER FOR WHICH GRANT IS BEING SOUGHT**

Name of the Programme\* +

**PROGRAM**

**DETAILS OF EXPERTS/RESOURCE PERSONNEL OF THE CONCERNED PROGRAMME**

| 1. Name<br>2. DOB  | 1. Current Posting<br>2. Qualifications   | 1. Specialization<br>2. Experience in the subject   | 1. Email Address<br>2. Mobile No  |   |
|--|---|---|---|---|
| Name <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Current Posting <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Specialization <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/>            | Email Address <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | + |
| DOB <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/>  | Qualifications <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/>  | Experience in the subject <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Mobile No <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/>     |   |

**DETAILS OF THE DEPARTMENT IN THE ORG. (I.E. FACULTY/CLINICAL/ INFRASTRUCTURE DETAILS ETC.)**

Name of the department  Specialization  +

**DETAILS OF FACULTY**

| Department Name | Name   | Qualification   | DOJ   | Specialization (Subject)   | Total experience in the subject  |   |
|-----------------|--|---|---|--|--|---|
| Select ▼        | Name <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Qualification <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | DOJ <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Specialization (Su <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Total experience i <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | + |

**DETAILS OF PAST EXPERIENCE IN ORGANIZING SUCH PROGRAMMES**

| Name of the programme   | Date on which programme was held   | Total no. of participants   |   |
|---|--|---|---|
| Name of the programme <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Date on which programme was held <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | Total no. of participants <input style="width: 90%; border: none; border-bottom: 1px solid #ccc;" type="text"/> | + |

**Whether any grant-in-aid has been received from the Ministry of Ayush earlier\***

Select Whether any grant-in-aid has been received from the ... ▼

**Total amount sought for grant from Ministry of AYUSH (with breakup) for non-customized CME programmes\***

**Details of action plan for the implementation of the project\***

**Justification as to why organization is keen to undertake this project with their vision\***

**Clinical/Infrastructure Details\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Total amount sought for grant from Ministry (with breakup)\***

No file chosen

Allowed xls,xlsx formats.  
Optimal Size : 2MB

Any other relevant information

Click to go to previous form

Click to submit form details

Previous

Click to save form details and submit later

Save Draft






Save & Next

Figure 8-29





**Enter following details:**

- Name of the Programme: Enter name of programme
- Click  to add more Programme name
- Name: Enter name
- DOB: Enter DOB
- Current Posting: Enter current posting
- Qualifications: Enter qualification
- Specialization: Enter specialization
- Experience in the subject: Enter experience in the subject
- Email Address: Enter email address
- Mobile No: Enter mobile number
- Click  to add more name of the department and specialization
- Name of the department
- Specialization
- Click  to add details of experts/resource personnel of the concerned programme
- Department Name: Select department name
- Name: Enter name
- Qualification: Enter qualification
- DOJ: Enter DOJ
- Specialization (Subject): Enter specialization
- Total experience in the subject: Enter total experience in the subject
- Click  to add more details of faculty
- Name of the programme
- Date on which programme was held
- Total no. of participants
- Click  to add more details of past experience in organizing such programmes
- Whether any grant-in-aid has been received from the Ministry of Ayush earlier: Enter Whether any grant-in-aid has been received from the Ministry of Ayush earlier
- Total amount sought for grant from Ministry of AYUSH (with breakup) for non-customized CME programmes): Enter total amount sought for grant from Ministry of AYUSH (with breakup) for non-customized CME programmes)
- Details of action plan for the implementation of the project: Enter details of action plan for the implementation of the project
- Justification as to why organization is keen to undertake this project with their vision: Enter justification as to why organization is keen to undertake this project with their vision
- Clinical/Infrastructure Details: Enter clinical/infrastructure details:
- Click  to upload file
- Total amount sought for grant from Ministry (with breakup): Click  to upload file
- First installment is transferred once the application is approved



First installment is transferred once the application is approved.

- Any other relevant information: Enter any other relevant information
- Click **Previous** to go to previous form
- Click **Save Draft** to save project details and submit later
- Click **Save & Next** to save details of organization and move to next form

### 8.3.1.3 Attachments

Figure 8-30

#### Enter following details:

- Copy of DPR:
  - Click **Choose File** to upload file
- Copy of registration certificate:
  - Click **Choose File** to upload file
- Copy of audited statements of account for last 5 years:
  - Click **Choose File** to upload file
- Copy of bye-laws of the organization:
  - Click **Choose File** to upload file
- Copy of bank statement of the organization in case of nongovernmental organization:
  - Click **Choose File** to upload file



- Copy of supporting that organization has not obtained or applied grants for the same purpose or activity from any other ministry or department or state government of any nongovernmental organization:
- Click **Choose File** to upload file
- Click **Previous** to go to previous form
- Click **Save Draft** to save attachments and submit later
- Click **Submit** to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **[Name]**  
Your application NO. 030122/100374 has been submitted successfully for Capacity Building & CME in Ayush On Ayush.  
Kindly quote your application NO. 030122/100374 in all future correspondence and keep checking status of your application on your dashboard.  
Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-31

On successful submission of form following message will be displayed:

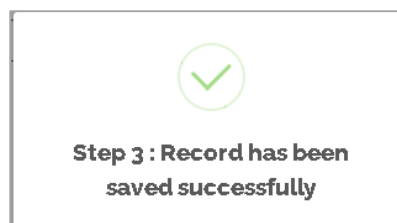


Figure 8-32

If the PMU has approved the application, following screen will be displayed:

Figure 8-33



- Click [Download Pdf](#) to download application details in PDF
- Click [Request for Reimbursement](#) to send request for reimbursement





















### 8.3.2 View Applications

Frontend user can search application by entering search terms in search textbox

Capacity Building & CME in Ayush will be displayed with following column headings:



**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action  |
|--------|-----------------------|--------|------------------|--------------|-----------|---|
| 1      | Bhawana Sewa Sansthan | CME    | 030122/100379    | 03-Jan-2022  | Draft     |       |
| 2      | Bhawana Sewa Sansthan | CME    | 030122/100378    | 03-Jan-2022  | Draft     |       |
| 3      | Bhawana Sewa Sansthan | IEC-B  | 030122/100377    | 03-Jan-2022  | Submitted |       |
| 4      | Bhawana Sewa Sansthan | IEC-B  | 030122/100376    | 03-Jan-2022  | Submitted |       |
| 5      | Bhawana Sewa Sansthan | IEC-A  | 030122/100375    | 03-Jan-2022  | Draft     |       |
| 6      | Bhawana Sewa Sansthan | IEC-A  | 030122/100374    | 03-Jan-2022  | Submitted |     |
| 7      | Bhawana Sewa Sansthan | IEC-A  | 311221/100372    | 30-Dec-2021  | Draft     |   |
| 8      | Bhawana Sewa Sansthan | IEC-A  | 311221/100373    | 30-Dec-2021  | Draft     |   |
| 9      | Bhawana Sewa Sansthan | PHI    | 301221/100371    | 30-Dec-2021  | Draft     |   |
| 10     | Bhawana Sewa Sansthan | NMPB-B | 291221/100368    | 29-Dec-2021  | Draft     |   |

Showing 1 to 10 of 116 entries [Previous](#) [1](#) [2](#) [3](#) [4](#) [5](#) ... [12](#) [Next](#)

Figure 8-34

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click  (details) to view application details
- Click  (edit) to edit application details



## 8.3.3 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | CME    | 030122/100379    | 03-Jan-2022  | Draft     |        |
| 2      | Bhawana Sewa Sansthan | CME    | 030122/100378    | 03-Jan-2022  |           |        |
| 3      | Bhawana Sewa Sansthan | IEC-B  | 030122/100377    | 03-Jan-2022  |           |        |
| 4      | Bhawana Sewa Sansthan | IEC-B  | 030122/100376    | 03-Jan-2022  |           |        |
| 5      | Bhawana Sewa Sansthan | IEC-A  | 030122/100375    | 03-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IEC-A  | 030122/100374    | 03-Jan-2022  | Submitted |        |
| 7      | Bhawana Sewa Sansthan | IEC-A  | 311221/100372    | 31-Dec-2021  | Draft     |        |
| 8      | Bhawana Sewa Sansthan | IEC-A  | 311221/100373    | 31-Dec-2021  | Draft     |        |
| 9      | Bhawana Sewa Sansthan | PHI    | 301221/100371    | 30-Dec-2021  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | NMPB-B | 291221/100368    | 29-Dec-2021  | Draft     |        |

Showing 1 to 10 of 116 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[12](#)
[Next](#)

Figure 8-35

Click to view & download application

**Capacity Building & CME in Ayush**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

|  |                                    |                       |  |
|--|------------------------------------|-----------------------|--|
| Name of the organization   | Bhawana Sewa Sans                  | Address               | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Registration No.   | 925/2003-04                        | Registration Date     | 09-01-2004   |
| Contact No.  | 9090909090                         | Email Address         | prafuljansari@silvertouch.com                                      |
| Status of permission for admission in case of AYUSH Educational Institutions during last 02 years and current year | No                                 | Year of establishment | 20-12-2021   |
| Organization Type  | Non-Profit Non-Govt. Organisations | PAN Number            | AAAAH3629P   |
| TIN Number   |                                    | TAN Number            |  |

Figure 8-36

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### 8.3.4 Research & Innovation in Ayush (erstwhile EMR Scheme)

#### 8.3.4.1 Details of the Organization

Note: This application can be submitted by Applicants (Govt. /Pvt. institutions/universities, GMP compliant industries of ASU&H drugs both public & private sector with R&D facilities, Principal investigators having minimum five years of experience in the concerned field).

### Research & Innovation in Ayush (erstwhile EMR Scheme)

**DETAILS OF THE ORGANIZATION**

|  |  |
|--|--|
| Name of the organization*              | Address*   |
| Bhawana Sewa Sansthan                  | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Registration Number*                   | Registration Date*   |
| 925/2003-04                            | 09-01-2004   |
| Contact No.*                           | Email Address*   |
| 9090909090                             | praful.jansari@silvertouch.com                                     |
| Organization Type*                     | Date of establishment*   |
| Non-Profit Non-Govt. Organisations     |  |
| PAN Number*                            | TIN Number   |
| AAAAH3629P                             |  |
|  | TAN Number   |
|  |  |
| Major achievements in last five years* |  |
| Achievement*                           | Details*   |
|  |  |

[Click to submit form details](#)

[Click to save form details and submit later](#)

[Save Draft](#) [Save & Next](#)

Figure 8-37

#### Enter following details:

- Name of the organization will be displayed automatically
- Address will be displayed automatically
- Registration Number will be displayed automatically
- Registration Date will be displayed automatically
- Contact No will be displayed automatically
- Email Address will be displayed automatically
- Organization Type: Select organization type from dropdown
- Date of establishment: Select date of establishment from dropdown
- PAN Number will be displayed automatically
- TIN Number: Enter TIN number
- TAN Number: Enter TAN number
- Achievement: Enter achievement
- Details: Enter details



- Click **Save Draft** to save details of organization and submit later
- Click **Save & Next** to save details of organization and move to next form

#### 8.3.4.2 Research Project Details

**RESEARCH PROJECT DETAILS**

|   |   |
|---|---|
| Title of the proposed project                             | Details of the project objectives/goals   |
| <input type="text"/>                                      | <input type="text"/>  |
| Details of action plan/methodology                        | Detailed summary of the project   |
| <input type="text"/>                                      | <input type="text"/>  |
| Relevance and usefulness of the study with particular to* |   |
| IPR values*   | Translational values*   |
| <input type="text"/>                                      | <input type="text"/>  |
| Utilization of outcomes of project*                       |   |
| <input type="text"/>                                      |   |
| Timeline of the project*                                  |   |
| Period required for pre-trial preparation*                | Period that may be needed for collecting the data*  |
| <input type="text"/>                                      | <input type="text"/>  |
| Period that may be required analyzing the data*           | Whether any grant-in-aid has been received from the Ministry of Ayush earlier, if yes provide details |
| <input type="text"/>                                      | <input type="text"/>  |
| Details of amount sought for grant from Ministry of AYUSH |   |
| Salary*   | Equipment*  |
| <input type="text"/>                                      | <input type="text"/>  |
| Books*  | Other non-recurring expenditure*  |
| <input type="text"/>                                      | <input type="text"/>  |
| Recurring expenditure*                                    | TA/DA*  |
| <input type="text"/>                                      | <input type="text"/>  |
| Institutional support*                                    | Fee of PI and Col*  |
| <input type="text"/>                                      | <input type="text"/>  |
| Miscellaneous expenses*                                   |   |
| <input type="text"/>                                      |   |

Figure 8-38



# आयुष मंत्रालय Ministry of Ayush

| Details of Principal Investigator*  |   |
|---|---|
| <b>Name*</b><br><input type="text" value="Name"/>   | <b>Designation*</b><br><input type="text" value="Designation"/>   |
| <b>Address*</b><br><input type="text" value="Address"/>   | <b>Educational Qualifications*</b><br><input type="text" value="Educational Qualifications"/>   |
| <b>Research Experience*</b><br><input type="text" value="Research Experience"/>   | <b>Details of research projects in hand under EMR scheme of Ministry of Ayush*</b><br><input type="text" value="Details of research projects in hand under EMR scheme of Ministry of Ayush"/> |
| <b>Details of research projects in hand under any other Grant-in-ad scheme of Government of India*</b><br><input type="text" value="Details of research projects in hand under any other Grant-in-ad scheme of Government of India"/> | <b>Details of other research projects, if any</b><br><input type="text" value="Details of other research projects, if any"/>  |
| <b>Publications, if any</b><br><input type="text" value="Publications, if any"/>  |   |

| DETAILS OF THE CO-INVESTIGATOR  |                                      |                                  |
|---|--------------------------------------|----------------------------------|
| <b>1. Name*</b><br><b>2. Designation*</b>                                     | <b>1. Address*</b>                   | <input type="button" value="+"/> |
| <input type="text" value="Name"/><br><input type="text" value="Designation"/> | <input type="text" value="Address"/> |                                  |

| EDUCATIONAL QUALIFICATIONS  |   |                                  |
|---|---|----------------------------------|
| <b>1. Co-Investigator Name*</b><br><b>2. Degree*</b><br><b>3. Institution*</b>  | <b>1. Field*</b><br><b>2. Year*</b>                                       | <input type="button" value="+"/> |
| <input type="text" value="Select Name"/><br><input type="text" value="Degree"/><br><input type="text" value="Institution"/> | <input type="text" value="Field"/><br><input type="text" value="Select"/> |                                  |

Figure 8-39





| RESEARCH EXPERIENCE  |   |  |
|--|---|--|
| 1. Co-Investigator Name*<br>2. From Date*<br>3. To Date*<br>4. Institution*<br>5. Particulars of work done*                      | 1. Research specialization<br>2. Details of research projects in hand under EMR scheme of Ministry of AYUSH<br>3. Details of research projects in hand under any other Grant-in-ad scheme of Government of India<br>4. Details of other research projects, if any | <input type="button" value="+"/>   |
| <input type="text" value="Select Name"/>   | <input type="text" value="Research specialization"/>  |  |
| <input type="text" value="From Date"/>   | <input type="text" value="Details of research projects in hand under EMR scheme of Ministry of AYUSH"/>   |  |
| <input type="text" value="To Date"/>   | <input type="text" value="Details of research projects in hand under any other Grant-in-ad scheme of Government of India"/>   |  |
| <input type="text" value="Institution"/>   | <input type="text" value="Details of other research projects, if any"/>   |  |
| <input type="text" value="Particulars of work done"/>  |   |  |
| PROJECT DETAILS  |   |  |
| 1. Co-Investigator Name*<br>2. Name of the project*  | 1. From Date*<br>2. To Date*  | 1. Details outlining outcome of the project*<br><input type="button" value="+"/> |
| <input type="text" value="Select Name"/>   | <input type="text" value="From Date"/>  | <input type="text" value="Details outlining outcome of the project"/>            |
| <input type="text" value="Name of the project"/>   | <input type="text" value="To Date"/>  |  |
| PUBLICATIONS, IF ANY   |   |  |
| 1. Co-Investigator Name*<br>2. Name of the publication*  | 1. References*  | <input type="button" value="+"/>   |
| <input type="text" value="Select Name"/>   | <input type="text" value="References"/>   |  |
| <input type="text" value="Name of the publication"/>   |   |  |
| Justification as to why organization is keen to undertake this project with their vision   |   |  |
| <input type="button" value="Previous"/> <input type="button" value="Save Draft"/> <input type="button" value="Save &amp; Next"/> |   |  |

Click to go to previous form


Click to save form details and move to next form

Click to save form details and submit later






Figure 8-40



**Enter following details:**

- Title of the proposed project: Enter title of the proposed project
- Details of the project objectives/goals: Enter details of the project objectives/goals
- Details of action plan/methodology: Enter details of action plan/methodology
- Detailed summary of the project: Enter detailed summary of the project
- IPR values: Enter IPR values
- Translational values: Enter translational values
- Utilization of outcomes of project: Enter utilization of outcomes of project
- Period required for pre-trial preparation: Select period required for pre-trial preparation from dropdown
- Period required for pre-trial preparation: Select period required for pre-trial preparation from dropdown
- Period that may be needed for collecting the data: Select period that may be needed for collecting the data from dropdown
- Whether any grant-in-aid has been received from the Ministry of Ayush earlier, if yes provide details: Enter whether any grant-in-aid has been received from the Ministry of Ayush earlier, if yes provide details
- Salary: Enter salary
- Equipment: Enter equipment
- Books: Enter books:
- Other non-recurring expenditure: Enter other non-recurring expenditure
- Recurring expenditure: Enter recurring expenditure
- TA/DA: Enter TA/DA
- Institutional support: Enter Institutional support
- Fee of PI and Col: Enter fee of PI and col
- Miscellaneous expenses: Enter miscellaneous expenses
- **Details of Principal Investigator:**
- Name: Enter name
- Designation: Enter designation
- Educational Qualifications: Enter educational qualifications
- Research Experience: Enter research experience
- Details of research projects in hand under EMR scheme of Ministry of Ayush: Enter details of research projects in hand under EMR scheme of Ministry of Ayush
- Details of research projects in hand under any other Grant-in-aid scheme of Government of India: Enter details of research projects in hand under any other Grant-in-aid scheme of Government of India
- Details of other research projects, if any: Enter details of other research projects, if any
- Publications, if any: Enter Publications, if any
- **Details of the co-investigator**
- Name: Enter name
- Designation: Enter designation
- Address: Enter address
- click  to add more details of the co-investigator
- **Educational qualifications:**



- Co-Investigator Name: Select co-investigator name
- Degree: Enter degree
- Institution: Enter institution
- **Research Experience:**
- Field: Enter field
- Year: Select year from dropdown
- Co-Investigator Name: Select co-investigator name from dropdown
- From Date: Select from date from calendar
- To Date: Select to date from calendar
- 4. Institution: Enter institution
- Particulars of work done: Enter particulars of work done
- **Project details:**
- Research specialization: Enter research specialization
- Details of research projects in hand under EMR scheme of Ministry of AYUSH: Enter details of research projects in hand under EMR scheme of Ministry of AYUSH
- Details of research projects in hand under any other Grant-in-ad scheme of Government of India: Enter details of research projects in hand under any other Grant-in-ad scheme of Government of India
- Details of other research projects, if any: Enter details of other research projects, if any
- Co-Investigator Name: Select co-investigator name from dropdown
- Name of the project: Enter name of the project
- From Date: Select from date from calendar
- To Date: Select to date from dropdown from calendar
- Details outlining outcome of the project: Enter details outlining outcome of the project
- Click  to add more details of project
- **Publications, if any:**
- Co-Investigator Name: Select co-investigator name
- Name of the publication: Enter name of the publication
- References: Enter references
- Click  to add more details of project
- Justification as to why organization is keen to undertake this project with their vision  
Enter justification as to why organization is keen to undertake this project with their vision
- Any other relevant information: Enter any other relevant information
- Click  to go to previous form
- Click  to save research and project details and submit later
- Click  to submit form details



### 8.3.4.3 Attachments

**ATTACHMENTS**

Copy of registration certificate\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**COPY OF AUDITED STATEMENTS OF ACCOUNT FOR LAST 5 YEARS**

| Years* | Attachment*                |   |
|--------|----------------------------|---|
| Select | Choose File No file chosen | + |

Allowed pdf formats.  
Optimal Size : 2MB

Copy of bye-laws of the organization\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of bank statement of the organization in case of non-governmental organization\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of certificate abiding to terms and conditions\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

In case annual report of the institution is not published, a note on activities during last year in brief may be enclosed\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of ethical clearance certificate from IEC/IAEC\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Previous

Click to go to previous form

Click to save form details and submit later

Click to submit form details

Save Draft Submit

Figure 8-41

#### Enter following details:

- Copy of registration certificate: Click **Choose File** to upload file
- Years: Select years from dropdown
- Attachment: Click **Choose File** to upload file
- Copy of bye-laws of the organization: Click **Choose File** to upload file
- Copy of bank statement of the organization in case of non-governmental organization: Click **Choose File** to upload file
- Copy of certificate abiding to terms and conditions: Click **Choose File** to upload file
- In case annual report of the institution is not published, a note on activities during last year in brief may be enclosed: Click **Choose File** to upload file



- Copy of ethical clearance certificate from IEC/IAEC: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

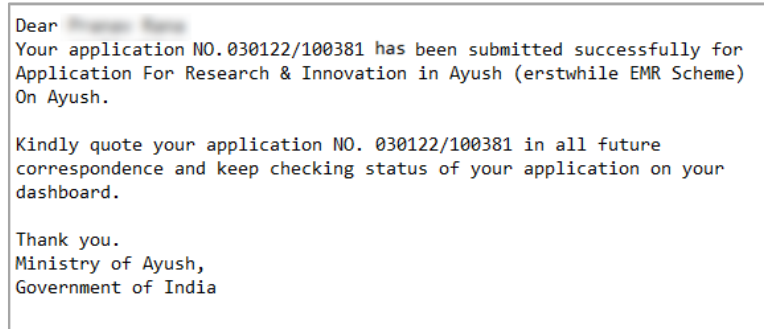


Figure 8-42

On successful submission of form following message will be displayed:

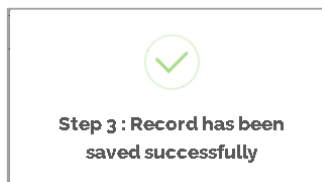


Figure 8-43

### 8.3.5 View Applications

Frontend user can search application by entering search terms in search textbox

Capacity Building & CME in Ayush will be displayed with following column headings:



### Applications

Show 10 entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | EMR    | 030122/100381    | 03-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | EMR    | 030122/100380    | 03-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | CME    | 030122/100379    | 03-Jan-2022  | Draft     |        |
| 4      | Bhawana Sewa Sansthan | CME    | 030122/100378    | 03-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IEC-B  | 030122/100377    | 03-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IEC-B  | 030122/100376    | 03-Jan-2022  | Draft     |        |
| 7      | Bhawana Sewa Sansthan | IEC-A  | 030122/100375    | 03-Jan-2022  | Draft     |        |
| 8      | Bhawana Sewa Sansthan | IEC-A  | 030122/100374    | 03-Jan-2022  | Draft     |        |
| 9      | Bhawana Sewa Sansthan | IEC-A  | 311221/100372    | 31-Dec-2021  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | IEC-A  | 311221/100373    | 31-Dec-2021  | Draft     |        |

Showing 1 to 10 of 118 entries

Previous 1 2 3 4 5 ... 12 Next

Figure 8-44

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details

### 8.3.6 Download application

### Applications

Show 10 entries Search:


| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 31     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100422    | 20-Jan-2022  | Rejected  |        |
| 32     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100421    | 20-Jan-2022  | Rejected  |        |
| 33     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100435    | 20-Jan-2022  | Submitted |        |
| 34     | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 200122/100434    | 20-Jan-2022  | Rejected  |        |
| 35     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100433    | 20-Jan-2022  | Backward  |        |
| 36     | Bhawana Sewa Sansthan | NMPB-B       | 200122/100432    | 20-Jan-2022  | Draft     |        |
| 37     | Bhawana Sewa Sansthan | NMPB-B       | 200122/100431    | 20-Jan-2022  | Forward   |        |
| 38     | Bhawana Sewa Sansthan | NMPB-D       | 200122/100430    | 20-Jan-2022  | Backward  |        |
| 39     | Bhawana Sewa Sansthan | NMPB-A       | 200122/100429    | 20-Jan-2022  | Rejected  |        |
| 40     | Bhawana Sewa Sansthan | EMR          | 190122/100420    | 19-Jan-2022  | Submitted |        |

Showing 31 to 40 of 160 entries

Previous 1 2 3 4 5 ... 16 Next



Figure 8-45

Click  to view & download application

### Research & Innovation in Ayush (erstwhile EMR Scheme)

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

|                          |                                    |                       |  |
|--------------------------|------------------------------------|-----------------------|--|
| Name of the organization | Bhawana Sewa Sanstha               | Address               | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Registration Number      | 925/2003-04                        | Registration Date     | 09-01-2004   |
| Contact No.              | 9090909090                         | Email Address         | praful.jansari@silvertouch.com                                     |
| Organization Type        | Non-Profit Non-Govt. Organisations | Date of establishment | 11-01-2022   |
| PAN Number               | AAAHH3629P                         | TIN Number            |  |

[Click to download application](#)

Figure 8-46

Click [Download Pdf](#) to download application in PDF

## 8.4 Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush

### Schemes

Central Sector Scheme for Promotion of Information, Education and Communication (IEC) in Ayush

Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush

Central Sector Scheme on Conservation, Development and Sustainable Management of Medicinal Plants

There are five sub parts in this scheme: 1) Component 3(A)(b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc., 2) Component 3(B)(a):Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH, 3) Component 3(B)(b):Application for Market authorization of AYUSH products at regulatory bodies of different countries, 4) Component 3(C)(v):Application for organization of International Conference/Seminar/Symposium/Workshop etc., and 5) Component 3(C)(iv):Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc.



Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush contains following components:

- Component 3(A) (b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc.
- Component 3(B) (a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH
- Component 3(B) (b): Application for Market authorization of AYUSH products at regulatory bodies of different countries
- Component 3(C) (v): Application for organization of International Conference/Seminar/Symposium/Workshop etc.
- Component 3(C) (iv): Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc.

**Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush**

[Download](#) 

Click to download scheme details

|   |  |   |
|---|--|---|
| Component 3(A)(b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc. | Component 3(B)(a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH  | Component 3(B)(b): Application for Market authorization of AYUSH products at regulatory bodies of different countries |
| Component 3(C)(v): Application for organization of International Conference/Seminar/Symposium/Workshop etc.                         | Component 3(C)(iv): Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc. |   |

Figure 8-48

Click [Download](#)  to download Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush document





8.4.1 Component 3(A) (b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc.

**Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush**

[Download](#)

- Component 3(A)(b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc.
- Component 3(B)(a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH
- Component 3(B)(b): Application for Market authorization of AYUSH products at regulatory bodies of different countries
- Component 3(C)(v): Application for organization of International Conference/Seminar/Symposium/Workshop etc.
- Component 3(C)(iv): Participation/organization of International exhibitions/conferences/workshops/seminars/road shows/trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/CI/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc.

Figure 8-49

8.4.1.1 Personal Details

**PERSONAL DETAILS**

Name of the applicant\*

Address\*

Email Address\*

Contact No.\*

Name of the organization in which applicant is working/private practitioner\*

**REGISTRATION DETAILS**

| Registration No. at State/Central registration body*                             | Registration Date*                             |  |
|--|--|--|
| <input type="text" value="Registration No. at State/Central registration body"/> | <input type="text" value="Registration Date"/> | <a href="#">Click to submit form details</a> |

[Click to save form details and submit later](#)

Figure 8-50

Enter following details:

- Name of the applicant: Enter name of the applicant
- Address will be displayed automatically
- Email Address will be displayed automatically
- Contact No will be displayed automatically
- Name of the organization in which applicant is working/private practitioner : Enter Name of the organization in which applicant is working/private practitioner



# आयुष मंत्रालय Ministry of Ayush

- Registration No. at State/Central registration body: Enter registration No. at state/central registration body
- Registration Date: Select registration date from calendar
  - click **+** to add more registration details
- Click **Previous** to go to previous form
- Click **Save & Next** to save personal details and move to next form



8.4.1.2 Details of Presentation

The screenshot shows a web form titled "DETAILS OF PRESENTATION". The form contains several input fields and buttons. Callouts in red boxes point to specific elements:

- "Click to go to previous form" points to the "Previous" button.
- "Click to submit form details" points to the "Save & Next" button.
- "Click to save form details and submit later" points to the "Save Draft" button.

The form fields include:

- Title of the paper to be presented\*
- Name of the host organization\*
- Complete address and contact details of the organizer.\*
- Name of the International Event\*
- Duration of the Event \*
- From\* (date)
- To\* (date)
- Duration of Stay\*
- From\* (date)
- To\* (date)
- Contact No.
- Country\* (dropdown menu)

Buttons at the bottom are: Previous, Save Draft, and Save & Next.

Figure 8-51

**Enter following details:**

- Title of the paper to be presented: Enter Title of the paper to be presented\*
- Name of the host organization: Enter name of the host organization
- Complete address and contact details of the organizer: Enter complete address and contact details of the organizer
- Name of the International Event: Enter name of the International Event
- Duration of the Event: Enter duration of the Event:
- From: Select from date form calendar
- To: Select to date from calendar
- Duration of Stay: Enter duration of stay
- From: Enter from date from calendar
- To: Enter to date from calendar
- Contact No: Enter contact number
- Country: Select country from dropdown
- Click **Previous** to go to previous form
- Click **Save Draft** to save event details and submit later
- Click **Save & Next** to presentation details and move to next form



### 8.4.1.3 Attachments

**ATTACHMENTS**

Copy of full paper to be presented\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Undertaking from the applicant (It may also be certified that the paper to be presented is the original work of the applicant and not presented anywhere.)\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

No Objection Certificate from Co-Authors (If any)

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Complete Bio-Data of the Applicant with his/her past experience for presentation of papers\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of acceptance letter of the paper to be presented, issued by host organization\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Recommendation of the head of the institution\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Detail of Estimated Expenditure for the said event.\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Any other Document (If any)

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to submit form details

Previous

Click to save form details and submit later

Save Draft

Submit

Figure 8-52

#### Enter following details:

- Copy of full paper to be presented: Click **Choose File** to upload file
- Undertaking from the applicant (It may also be certified that the paper to be presented is the original work of the applicant and not presented anywhere.)\*Click **Choose File** to upload file:
- No Objection Certificate from Co-Authors (If any): Click **Choose File** to upload file
- Complete Bio-Data of the Applicant with his/her past experience for presentation of papers: Click **Choose File** to upload file
- Copy of acceptance letter of the paper to be presented, issued by host organization: Click **Choose File** to upload file
- Recommendation of the head of the institution: Click **Choose File** to upload file
- Detail of Estimated Expenditure for the said event. Click **Choose File** to upload file
- Any other Document (If any): Click **Choose File** to upload file
- Click **Previous** to go to previous form



- Click **Save Draft** to save event details and submit later
- Click **Submit** to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **Prasen, Saha**  
Your application NO. 200122/100426 has been submitted successfully for Application For Component 3(A)(b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc. On Ayush.  
Kindly quote your application NO. 200122/100426 in all future correspondence and keep checking status of your application on your dashboard.  
Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-53

On successful submission of form following message will be displayed:

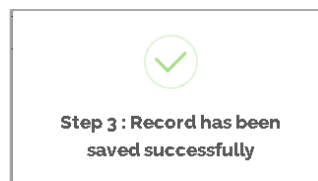


Figure 8-54

## 8.4.2 View Applications

Frontend user can search application by entering search terms in search textbox

Conference/Seminar/Symposium/Workshop etc. will be displayed with following column headings:



### Applications

Show 10 entries Search:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-A         | 200122/100426    | 20-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IEC-B        | 200122/100425    | 20-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100423    |              |           |        |
| 4      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100422    |              |           |        |
| 5      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100421    | 20-Jan-2022  | Rejected  |        |
| 6      | Bhawana Sewa Sansthan | EMR          | 190122/100420    | 19-Jan-2022  | Submitted |        |
| 7      | Bhawana Sewa Sansthan | EMR          | 190122/100419    | 19-Jan-2022  | Forward   |        |
| 8      | Bhawana Sewa Sansthan | IEC-B        | 180122/100418    | 18-Jan-2022  | Backward  |        |
| 9      | Bhawana Sewa Sansthan | IEC-A        | 180122/100417    | 18-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | PHI          | 170122/100416    | 17-Jan-2022  | Forward   |        |

Showing 1 to 10 of 126 entries

Previous 1 2 3 4 5 ... 13 Next

*Note: A red box highlights the search bar and the eye icon in the first row. A red arrow points from the eye icon to a callout box that says "Click to view application details".*

Figure 8-55

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details

If PMU user has approved application, frontend user will see the following screen where user can request for installment:



**Component 3(A)(b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc.**

[Request for Reimbursement](#) [Download Pdf](#)

**PERSONAL DETAILS**

Name of the applicant  Address

[Click to request for installment](#) [Click to download application details in PDF](#)

Email Address  Contact No.

Name of the organization in which applicant is working/private practitioner

| Registration No. at State/Central registration body | Registration Date                       |
|---|---|
| <input type="text" value="A5032010"/>               | <input type="text" value="27-01-2022"/> |

[Next](#)

Figure 8-56

- Click [Request for Reimbursement](#) to request and fill installment form
- Click [Download Pdf](#) to download applications details in PDF



**Component 3(A)(b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc. Instalment**

CENTRAL SECTOR SCHEME FOR PROMOTION OF INTERNATIONAL CO-OPERATION (IC) IN AYUSH - APPLICATION FOR PRESENTATION OF SCIENTIFIC PAPER IN THE INTERNATIONAL CONFERENCE/SEMINAR/SYMPOSIUM/WORKSHOP ETC. INSTALLMENT

Geo Location [Google Maps](#)

Latitude\*  Longitude\*

**PHOTO**

Photo\*  No file chosen  
Allowed jpg,jpeg,png,doc,pdf formats.

**VIDEO**

Video\*  No file chosen  
Allowed mp4 formats.

Certificate of participation\*  No file chosen  
Allowed jpg,jpeg,doc,pdf formats.

Receipts and vouchers\*  No file chosen  
Allowed jpg,jpeg,doc,pdf formats.

Boarding passes\*  No file chosen  
Allowed jpg,jpeg,doc,pdf formats.

Copy of PAN Card\*  No file chosen  
Allowed jpg,jpeg,doc,pdf formats.

ECS mandate form including Details of Aadhar Linked Bank Account alongwith a cancelled cheque\*  No file chosen  
Allowed jpg,jpeg,doc,pdf formats.

Other relevant documents\*  No file chosen  
Allowed jpg,jpeg,doc,pdf formats.

[Click to submit form details](#)

Figure 8-57

Enter following details:

- Click [Google Maps](#) to select geo location
- Latitude: Enter latitude
- Longitude: Enter longitude
- Photo: Click  to upload photo





- Video: Click [Choose File](#) to upload video
- Certificate of participation: Click [Choose File](#) to select file
- Receipts and vouchers: Click [Choose File](#) to select file
- Boarding passes: Click [Choose File](#) to select file
- Copy of PAN Card: Click [Choose File](#) to select file
- ECS mandate form including Details of Aadhar Linked Bank Account along with a cancelled cheque: Click [Choose File](#) to select file
- Other relevant documents: Click [Choose File](#) to select file
- Click [Submit](#) to submit form details

### 8.5 Component 3(C) (v): Application for organization of International Conference/Seminar/Symposium/Workshop etc.


**Central Sector Scheme for Promotion of International Co-operation (IC) in Ayush**

[Download](#) 

Click to download scheme details

|   |  |   |
|---|--|---|
| Component 3(A)(b): Application for presentation of scientific paper in the international conference/seminar/symposium/workshop etc. | Component 3(B)(a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH  | Component 3(B)(b): Application for Market authorization of AYUSH products at regulatory bodies of different countries |
| Component 3(C)(v): Application for organization of International Conference/Seminar/Symposium/Workshop etc.                         | Component 3(C)(iv): Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc. |   |

Figure 8-58

Click [Download](#)  to download Component 3(C) (v): Application for organization of International Conference/Seminar/Symposium/Workshop etc. document



### 8.5.1 Details of the Organization

#### DETAILS OF THE ORGANIZATION

Name of the Organization/company/ Unit etc\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email\*  
praful.jansari@silvertouch.com

Contact No.\*  
9090909090

Status\*  
Non-Profit Non-Govt. Organisations

Registration Number\*

Registration Date\*  
09-01-2004

Major activities/ field of the organization\*

#### ACHIEVEMENTS-DESCRIPTIONS LAST 05 YEARS

| Achievement* | Year*  | Description* |   |
|--------------|--------|--------------|---|
| Achievement  | Select | Description  | + |

Any Other Information (if any)


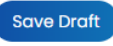

Click to submit form details

Click to save form details and submit later

Save Draft Save & Next

Figure 8-59

#### Enter following details:

- Name of the Organization/company/ Unit etc
- Address will be displayed automatically
- Email will be displayed automatically
- Contact No will be displayed automatically
- Status: Select status from dropdown
- Registration Number will be displayed automatically
- Registration Date will be displayed automatically
- Major activities/ field of the organization: Enter major activities/ field of the organization
- Achievement Enter achievement
- Year: Select year from dropdown
- Description: Enter description
- click  to add more organization details
- Any Other Information (If any): Enter any other information (If any)
- Click  to save details of organization and submit later
- Click  to save details of organization and move to next form



### 8.5.2 Project Details

The screenshot shows a web form titled "PROJECT DETAILS" with a dropdown arrow. The form contains several input fields and dropdown menus, all marked with an asterisk to indicate they are required. The fields are: "Name of the project\*", "Date of the Event\*" (with "From\*" and "To\*" sub-fields), "Place of the Event\*", "Total amount sought from Ministry of AYUSH (Rs.)\*", "Whether any grant in aid received from Ministry of AYUSH earlier, if yes provide details\*" (with a dropdown menu), "Whether grant in aid is sought/received from any other source including Central Govt./State Govt. for the same purpose, if yes provide details\*" (with a dropdown menu), and "Brief about the deliverables and expected outcomes of the proposed event\*". There is also a text area for "Any other information relevant to the project, if any". At the bottom of the form, there are four buttons: "Previous", "Click to go to previous form", "Click to save form details and submit later", "Click to submit form details", "Save Draft", and "Save & Next". Red callout boxes highlight these buttons and their corresponding actions.

Figure 8-60

#### Enter following details:

- Name of the project: Enter name of the project
- From: Select from date form dropdown
- To: Select to from dropdown
- Place of the Event: Enter place of the event
- Details of coverage area of the project: Enter details of coverage area of the project:
- Total amount sought from Ministry of AYUSH (Rs.): Enter total amount sought from Ministry of AYUSH (Rs.)

**Fund/Installment is transferred post submission/approval of monitoring parameters.**

- Whether any grant in aid received from Ministry of AYUSH earlier, if yes provide details: Select whether any grant in aid received from Ministry of AYUSH earlier, if yes provide details
- If frontend user selects Yes from dropdown, then user has to enter:
- Provide details: Enter provide details
- Whether grant in aid is sought/received from any other source including Central Govt./State Govt. for the same purpose, if yes provide details: Select whether grant in aid is sought/received from any other source including Central Govt./State Govt. for the same purpose, if yes provide details
- If frontend user selects Yes from dropdown, then user has to enter:



- Provide details: Enter provide details
- Brief about the deliverables and expected outcomes of the proposed event: Enter Brief about the deliverables and expected outcomes of the proposed event
- Any other information relevant to the project, if any: Enter any other information relevant to the project, if any
- Click [Previous](#) to go to previous form
- Click [Save Draft](#) to save event details and submit later
- Click [Save & Next](#) to presentation details and move to next form



## 8.5.3 Attachments

**ATTACHMENTS**

Copy of Concept Note along with complete Detailed Project Report (DPR) indicating objectives, action plan, out puts & outcomes, modalities & logistics, tentative programme etc.\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of registration certificate (Self Attested)\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Turnover of last 05 years (self attested audited statement)\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of Article of association, By-laws of the organization (Self attested), if required.

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of a note past activities and Major Achievements of the organization in the last 05 years.\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of list of invited National and International delegates\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of Recommendation of Head of Department (HOD)\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Recommendation/forwarding of State Government, Directorate of AYUSH for organization of International Seminars/ Conference/Symposium/Workshops etc.\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of clearance certificate from Ministry of External Affairs\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of clearance certificate from Ministry of Home Affairs\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Total budgetary requirements for the proposed event and break up of grant sought under the IC Scheme with justification for each item wise\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Any Other Document(if any)

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to save form details and submit later

Click to submit form details

Previous

Save Draft

Submit

Figure 8-61



**Enter following details:**

- Copy of Concept Note along with complete Detailed Project Report (DPR) indicating objectives, action plan, out puts & outcomes, modalities & logistics, tentative programme etc.: Click  to upload file
- Copy of registration certificate (Self- attested ): Click  to upload file
- Turnover of last 05 years (self-attested audited statement): Click  to upload file : Click  to upload file
- Copy of a note past activities and Major Achievements of the organization in the last 05 years: Click  to upload file
- Copy of list of invited National and International delegates: Click  to upload file
- Recommendation/forwarding of State Government, Directorate of AYUSH for organization of International Seminars/ Conference/Symposium/Workshops etc: Click  to upload file
- Copy of Recommendation of Head of Department (HOD): Click  to upload file
- Copy of clearance certificate from Ministry of External Affairs: Click  to upload file
- Copy of clearance certificate from Ministry of Home Affairs: Click  to upload file
- Total budgetary requirements for the proposed event and break up of grant sought under the IC Scheme with justification for each item wise: Click  to upload file
- Any Other Document(If any)
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **Prakash Singh**  
Your application NO.200122/100428 has been submitted successfully for Application For Component 3(C)(v):Application for organization of International Conference/Seminar/Symposium/Workshop etc On Ayush.  
Kindly quote your application NO. 200122/100428 in all future correspondence and keep checking status of your application on your dashboard.  
Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-62

On successful submission of form following message will be displayed:

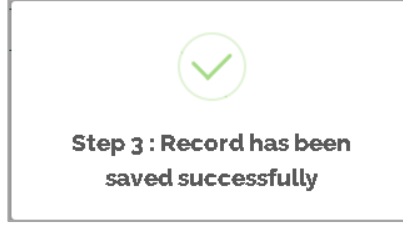


Figure 8-63



#### 8.5.4 View Applications

Frontend user can search application by entering search terms in search textbox

Component 3(C) (v): Application for organization of International Conference/Seminar/Symposium/Workshop etc. will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-D         | 200122/100428    | 20-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-A         | 200122/100427    | 20-Jan-2022  | Submitted |        |
| 3      | Bhawana Sewa Sansthan | IC-A         | 200122/100426    | 20-Jan-2022  | Submitted |        |
| 4      | Bhawana Sewa Sansthan | IEC-B        | 200122/100425    | 20-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100423    | 20-Jan-2022  | Forward   |        |
| 6      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100422    | 20-Jan-2022  | Rejected  |        |
| 7      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100421    | 20-Jan-2022  | Rejected  |        |
| 8      | Bhawana Sewa Sansthan | EMR          | 190122/100420    | 19-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | EMR          | 190122/100419    | 19-Jan-2022  | Forward   |        |
| 10     | Bhawana Sewa Sansthan | IEC-B        | 180122/100418    | 18-Jan-2022  | Backward  |        |

Showing 1 to 10 of 128 entries

Previous 1 2 3 4 5 ... 13 Next

Figure 8-64

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details





## 8.5.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Application No. | Start Date  | Status    | Action |
|--------|-----------------------|--------|-----------------|-------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IEC-A  |                 |             | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-D   | 310122/100458   | 31-Jan-2022 | Forwarded |        |
| 3      | Bhawana Sewa Sansthan | IC-E   | 310122/100457   | 31-Jan-2022 | Forward   |        |
| 4      | Bhawana Sewa Sansthan | IC-D   | 310122/100456   | 31-Jan-2022 | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IC-D   | 310122/100455   | 31-Jan-2022 | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IC-C   | 310122/100454   | 31-Jan-2022 | Forward   |        |
| 7      | Bhawana Sewa Sansthan | IC-C   | 310122/100453   | 31-Jan-2022 | Submitted |        |
| 8      | Bhawana Sewa Sansthan | IC-B   | 310122/100452   | 31-Jan-2022 | Forward   |        |
| 9      | Bhawana Sewa Sansthan | IC-B   | 310122/100451   | 31-Jan-2022 | Submitted |        |
| 10     | Bhawana Sewa Sansthan | NMPB-C | 310122/100460   | 31-Jan-2022 | Draft     |        |

Showing 1 to 10 of 160 entries Previous 1 2 3 4 5 ... 16 Next

Figure 8-65

Click to view & download application

**Component 3(C)(v):Application for organization of International Conference/Seminar/Symposium/Workshop etc.**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

Name of the Organization: Bhawana Sewa Sansthan Address: 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email: profuljansari@silvertouch.com Contact No.: 9090909090

Status: Non-Profit Non-Govt. Organisations Registration Number: 365254

Registration Date: 09-01-2004 Major activities/ field of the organization: 252550

| Achievement | Year | Description |
|-------------|------|-------------|
| Achievement | 2018 | Description |

Figure 8-66

Click [Download Pdf](#) to download application in PDF



## 8.6 Component 3(B) (a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH

### 8.6.1 Details of the Organization

**DETAILS OF THE ORGANIZATION**

Following are two different type of Organizations under this component which requires slightly different information at the time of submitting the proposal.\*

Drug Manufacturers / Entrepreneurs etc

Name of the organization\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email\*  
praful.jansari@silvertouch.com

Contact No.\*  
9090909090

Registration Number\*  
925/2003-04

Registration Date\*  
09-01-2004

GMP Certificate Number\*

Import Export Certificate (IEC)

Click to save form details and submit later

Click to submit form details

Save Draft Save & Next

Figure 8-67

#### Enter following details:

- Following are two different type of Organizations under this component which requires slightly different information at the time of submitting the proposal: Select Following are two different type of Organizations under this component which requires slightly different information at the time of submitting the proposal from dropdown
- If frontend user selects Drug Manufacturers / Entrepreneurs etc from dropdown, then user needs to enter following details:
  - Name of the organization: Enter name of the organization
  - Address will be displayed automatically
  - Email will be displayed automatically
  - Contact No will be displayed automatically
  - Registration Number will be displayed automatically
  - Registration Date will be displayed automatically
  - GMP Certificate Number: Enter GMP certificate number
  - Import Export Certificate (IEC) Number: Enter import export certificate (IEC) number
- If frontend user AYUSH hospitals/ Institutions/ Centers etc from dropdown, then user needs to enter following details:
  - Name of the organization: Enter name of the organization
  - Address will be displayed automatically
  - Email will be displayed automatically
  - Contact No will be displayed automatically
  - Registration Number will be displayed automatically



- Registration Date will be displayed automatically
- Registered with: Enter registered with
- Stream of Speciality: Select stream of specialty from dropdown
- No. of Beds (If available): Enter no of beds
- OPD Daily Data for last 3 months (along with PDF file) if available: Click  to upload file
- IPD Daily Data for last 3 months (along with PDF file), if available: Click  to upload file
- ICU (YES/NO) (along with the Certificate PDF), if available
- If frontend user selects **Yes**  radio button, then user has to enter following details:  
Click  to upload file
- If frontend user select **No**  radio button, then user has to add following details: No. of Staff: Enter no. of staff
- If frontend user select **Yes**  radio button, then user has to add following details: details of the specialized treatment(s) given
- Accreditation from various boards (e.g. NABH etc) with pdf file, if available: Click  to upload file
- If any specialized treatment is given
- If frontend user selects **No**  radio button, then user has to enter following details
- Accreditation from various boards (e.g. NABH etc) with pdf file, if available: Click  to upload file
- Click  to save details of organization and submit later
- Click  to save details of organization and move to next form




### 8.6.2 Project Details

The screenshot shows a web form titled "PROJECT DETAILS". It contains several input fields: "Name of the event for which grant is being sought\*", "Date of the Event\*", "Country of the event\*", and "Details of the Event\*". Below these is a table for "LIST OF PRODUCTS TO BE DISPLAYED" with columns for "SI No.\*", "Product Name\*", and "Product Description\*", and a "+" button to add more rows. Further down are dropdown menus for "Whether grant in aid has been received from Ministry of AYUSH earlier, if yes details thereof.\*" and "Select Whether grant in aid has been received from Ministry of ...", and input fields for "Total Expenditure Involved in participation of the Event" and "Total amount of grant sought from Ministry of AYUSH\*". At the bottom, there are buttons for "Previous", "Save Draft", and "Save & Next". Red callout boxes point to the "Previous" button, a "Click to go to previous form" link, a "Click to save form details and submit later" link, a "Click to submit form details" link, and the "Save Draft" and "Save & Next" buttons.

Figure 8-68

#### Enter following details:

- Name of the event for which grant is being sought: Enter Name of the event for which grant is being sought
- Date of the Event: Select date of the event
- Country of the event: Enter country of the event
- Details of the Event: Enter details of the event
- SI No: Enter SI No
- Product Name: Enter product name
- Product Description: Product description
- Click  to add more List of products to be displayed
- Whether the event is related to the hospital, if yes, detail thereof: Select Whether the event is related to the hospital, if yes, detail thereof
- Whether grant in aid has been received from Ministry of AYUSH earlier, if yes details thereof: Select whether grant in aid has been received from Ministry of AYUSH earlier, if yes details thereof

If frontend user selects Yes from dropdown, then user has to provide Details:

- Total Expenditure Involved in participation of the Event: Enter total expenditure involved in participation of the event
- Total amount of grant sought from Ministry of AYUSH: Enter total amount of grant sought from ministry of AYUSH



Fund/Installment is transferred post submission/approval of monitoring parameters.

- Any other information, if any: Enter any other information, if any
- Total Expenditure Involved in participation of the Event: Enter total expenditure involved in participation of the event
- Total amount of grant sought from Ministry of AYUSH: Enter total amount of grant sought from ministry of AYUSH
- Any other information, if any: Enter any other information, if any.
- Click [Previous](#) to go to previous form
- Click [Save Draft](#) to save project details and submit later
- Click [Save & Next](#) to project details and move to next form



## 8.6.3 Attachments

**ATTACHMENTS**

**Name and Details of the International Event\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of the GMP certificate\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Import Export Certificate\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**STATEMENT OF TURNOVER OF LAST 03 YEARS (STATING TOTAL TURNOVER, TURNOVER RELATED TO AYUSH PRODUCTS AND EXPORT RELATED TO AYUSH PRODUCTS ETC. FOR EACH YEAR)**

| Years*   | Attachment*  |   |
|--|--|---|
| <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Select</div> | <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;"> <input type="button" value="Choose File"/> No file chosen         </div> <p><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small></p> <div style="text-align: center; margin-top: 10px;"> </div> | <div style="background-color: #0056b3; color: white; width: 20px; height: 20px; border-radius: 50%; display: flex; align-items: center; justify-content: center; margin: 0 auto;">+</div> |

**List and Details of products to be displayed in the Event\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Manufacturing License for these Products\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Undertaking from the applicant for not seeking/taking any grant in aid/ Incentive from Central Govt./ State Govt. etc for the same purpose.\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Detail of Estimated Expenditure for the said event.\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Any other document, if any**

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Previous

Click to save form details and submit later

Click to submit form details

Save Draft

Submit

Figure 8-69



**Enter following details:**

- Name and Details of the International Event: Click  to upload file
- Copy of the GMP certificate: Click  to upload file
- Copy of Import Export Certificate: Click  to upload file

Statement of turnover of last 03 years (stating total turnover, turnover related to Ayush products and export related to Ayush products etc. for each year)

- Years: Select years from dropdown
- Attachment: Click  to upload file
- List and Details of products to be displayed in the Event: Click  to upload file
- Manufacturing License for these Products: Click  to upload file
- Undertaking from the applicant for not seeking/taking any grant in aid/ incentive from Central Govt./ State Govt. etc for the same purpose: Click  to upload file
- Detail of Estimated Expenditure for the said event: Click  to upload file
- Any other document, if any: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

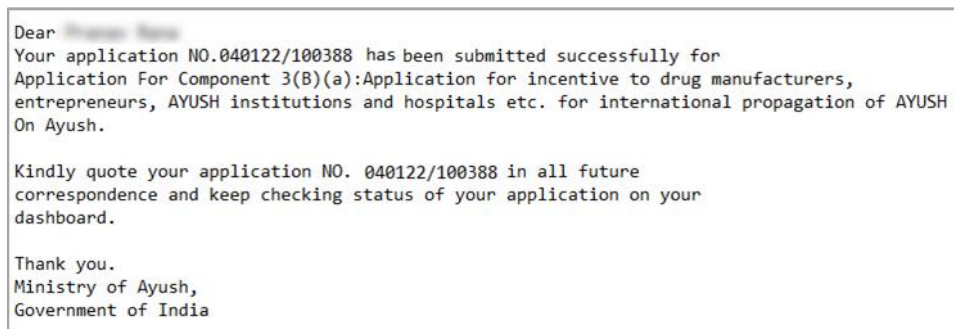


Figure 8-70

On successful submission of form following message will be displayed:

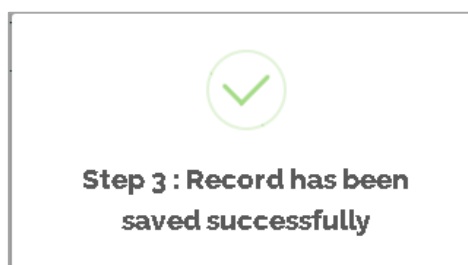


Figure 8-71



### 8.6.4 View Applications

Frontend user can search application by entering search terms in search textbox

Component 3(B) (a): Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-B   | 040122/100388    | 04-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-B   | 040122/100387    | 04-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | IC-B   | 040122/100386    | 04-Jan-2022  | Draft     |        |
| 4      | Bhawana Sewa Sansthan | IC-D   | 030122/100383    | 03-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IC-A   | 030122/100382    | 03-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | EMR    | 030122/100381    | 03-Jan-2022  | Submitted |        |
| 7      | Bhawana Sewa Sansthan | EMR    | 030122/100380    | 03-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | CME    | 030122/100379    | 03-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | CME    | 030122/100378    | 03-Jan-2022  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | IEC-B  | 030122/100377    | 03-Jan-2022  | Submitted |        |

Showing 1 to 10 of 125 entries

Previous 1 2 3 4 5 ... 13 Next

Figure 8-72

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details





## 8.6.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IEC-A  | 020222/100463    | 02-Feb-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-D   | 310122/100458    | 31-Jan-2022  | Forward   |        |
| 3      | Bhawana Sewa Sansthan | IC-E   | 310122/100457    | 31-Jan-2022  | Forward   |        |
| 4      | Bhawana Sewa Sansthan | IC-D   | 310122/100456    | 31-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IC-D   | 310122/100455    | 31-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IC-C   | 310122/100454    | 31-Jan-2022  | Forward   |        |
| 7      | Bhawana Sewa Sansthan | IC-C   | 310122/100453    | 31-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | IC-B   | 310122/100452    | 31-Jan-2022  | Forward   |        |
| 9      | Bhawana Sewa Sansthan | IC-B   | 310122/100451    | 31-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | NMPB-C | 310122/100460    | 31-Jan-2022  | Draft     |        |

Showing 1 to 10 of 160 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[16](#)
[Next](#)

Figure 8-73

Click to view & download application

**Component 3(B)(a):Application for incentive to drug manufacturers, entrepreneurs, AYUSH institutions and hospitals etc. for international propagation of AYUSH**

[Download Pdf](#) Click to download application

**DETAILS OF THE ORGANIZATION**

Following are two different type of Organizations under this component which requires slightly different information at the time of submitting the proposal:

Drug Manufacturers / Entrepreneurs etc

Non-Profit Non-Govt. Organisations

|  |  |
|--|--|
| <p>Name of the organization</p> <input type="text" value="Bhawana Sewa Sansthan"/>                             | <p>Name of the organization</p> <input type="text" value="Bhawana Sewa Sansthan"/>                             |
| <p>Address</p> <input type="text" value="417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003"/> | <p>Address</p> <input type="text" value="417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003"/> |
| <p>Email</p> <input type="text" value="praful.jansari@silvertouch.com"/>                                       | <p>Contact No.</p> <input type="text" value="9090909090"/>   |
| <p>Organization Type</p> <input type="text" value="Non-Profit Non-Govt. Organisations"/>                       | <p>Registration Number</p> <input type="text" value="925/2003-04"/>  |
| <p>Registration Date</p> <input type="text" value="09-01-2004"/>   | <p>GMP Certificate Number</p> <input type="text" value="25240"/>   |

Figure 8-74

Click [Download Pdf](#) to download application in PDF



8.7 Component 3(C) (iv): Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc.

8.7.1 Details of the Organization

### DETAILS OF THE ORGANIZATION

Name of the Organization/company/ Unit etc\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email\*  
prafuljansari@silvertouch.com

Contact No.\*  
9090909090

Organization Type\*  
Non-Profit Non-Govt. Organisations

Registration Number (if required)\*

Registration Date (if required)\*  
09-01-2004

Major activities/ field of the organization\*

#### ACHIEVEMENTS-DESCRIPTIONS LAST 05 YEARS

| Achievement* | Year*  | Description* |   |
|--------------|--------|--------------|---|
| Achievement  | Select | Description  | + |

Any Other Information (if any)


Click to submit form details

Click to save form details and submit later

Save Draft Save & Next

Figure 8-75

Enter following details:

- Name of the Organization/company/ Unit etc will be displayed automatically
- Address will be displayed automatically
- Email will be displayed automatically
- Contact No will be displayed automatically
- Organization Type: Select organization type from dropdown
- Registration Number (if required): Enter registration number
- Registration Date (if required) will be displayed automatically
- Major activities/ field of the organization
- Achievement: Enter achievement
- Year: Select year from dropdown
- Description: Enter description
- Click  to add more achievements-descriptions last 05 years
- Any Other Information (If any): Enter any other information



- Click **Previous** to go to previous form
- Click **Save Draft** to save details of organization and submit later
- Click **Save & Next** to save details of organization and move to next form

### 8.7.2 Project Details

The screenshot shows a web form titled "PROJECT DETAILS". The form contains several input fields and dropdown menus. At the bottom, there are three buttons: "Previous", "Save Draft", and "Save & Next". Red callout boxes with arrows point to these buttons and provide instructions: "Click to go to previous form" points to the "Previous" button, "Click to save form details and submit later" points to the "Save Draft" button, and "Click to submit form details" points to the "Save & Next" button.

**PROJECT DETAILS**

Name of the project\*

Date of the Event\*

From\*

To\*

Place of the Event\*

Details of coverage area of the project\*

Total amount sought from Ministry of AYUSH (Rs.) \*

Whether any grant in aid received from Ministry of AYUSH earlier, if yes provide details\*

Provide details\*

Whether grant in aid is sought/received from any other source including Central Govt./State Govt. for the same purpose, if yes provide details\*

Provide details\*

Brief about the deliverables and expected outcomes of the proposed event\*

Any other information relevant to the project (if required)

**Previous** **Save Draft** **Save & Next**

Figure 8-76

#### Enter following details:

- Name of the project: Enter name of project
- Date of Event From: Select date from calendar
- To: Select date of event to from calendar
- Place of the Event: Enter place of the event
- Details of coverage area of the project: Enter details of coverage area of the project
- Total amount sought from Ministry of AYUSH (Rs.): Enter total amount sought from Ministry of AYUSH (Rs.)

Fund/Installment is transferred post submission/approval of monitoring parameters.



# आयुष मंत्रालय Ministry of Ayush

- Whether any grant in aid received from Ministry of AYUSH earlier, if yes provide details: Select whether any grant in aid received from Ministry of AYUSH earlier, if yes provide details Yes/No from dropdown
- Provide details: Enter provide details
- Whether grant in aid is sought/received from any other source including Central Govt./State Govt. for the same purpose, if yes provide details: Select whether grant in aid is sought/received from any other source including Central Govt./State Govt. for the same purpose, if yes provide details Yes/No from dropdown
- Provide details: Enter provide details
- Brief about the deliverables and expected outcomes of the proposed event: Enter brief about the deliverables and expected outcomes of the proposed event
- Any other information relevant to the project (if required): Enter Any other information relevant to the project (if required)
- Click [Save Draft](#) to save project details and submit later
- Click [Save & Next](#) to project details and move to next form



8.7.3 Attachments

**ATTACHMENTS** ▼

Copy of Concept Note along with complete Detailed Project Report (DPR) indicating objectives, action plan, out puts & outcomes, modalities & logistics, tentative programme etc.\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of Registration certificate (self attested), if required

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Turnover of last 05 years (self attested audited statement) (if required)

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of By-laws of the organization(Self attested), if required

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of list of invited National and International delegates \*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of Recommendation/ forwarding of Embassy of India/Mission concerned for International Event. (if required)

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Total budgetary requirements for the proposed event and break up of grant sought under the IC Scheme with justification for each item wise\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Any Other Document(if any)

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to save form details and submit later

Click to submit form details

Previous

Save Draft

Submit

Figure 8-77



**Enter following details:**

- Copy of Concept Note along with complete Detailed Project Report (DPR) indicating objectives, action plan, out puts & outcomes, modalities & logistics, tentative programme etc.: Click  to upload file
- Copy of Registration certificate (self-attested), if required: Click  to upload file
- Turnover of last 05 years (self- attested audited statement) (if required): Click  to upload file
- Copy of By-laws of the organization(Self- attested ), if required: Click  to upload file
- Copy of list of invited National and International delegates: Click  to upload file
- Copy of Recommendation/ forwarding of Embassy of India/Mission concerned for International Event. (if required): Click  to upload file
- Total budgetary requirements for the proposed event and break up of grant sought under the IC Scheme with justification for each item wise: Click  to upload file
- Any Other Document(If any): Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **[Name]**  
Your application NO. 030122/100374 has been submitted successfully for Component 3(C)(iv):Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc On Ayush.

Kindly quote your application NO. 030122/100374 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-78



On successful submission of form following message will be displayed:

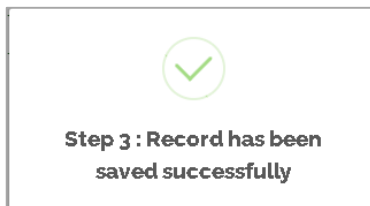


Figure 8-79

### 8.7.4 View Applications

Frontend user can search application by entering search terms in search textbox

Component 3(C) (iv): Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-E   | 040122/100389    | 04-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-B   | 040122/100388    | 04-Jan-2022  | Submitted |        |
| 3      | Bhawana Sewa Sansthan | IC-B   | 040122/100387    | 04-Jan-2022  | Draft     |        |
| 4      | Bhawana Sewa Sansthan | IC-B   | 040122/100386    | 04-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IC-D   | 030122/100383    | 03-Jan-2022  | Submitted |        |
| 6      | Bhawana Sewa Sansthan | IC-A   | 030122/100382    | 03-Jan-2022  | Submitted |        |
| 7      | Bhawana Sewa Sansthan | EMR    | 030122/100381    | 03-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | EMR    | 030122/100380    | 03-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | CME    | 030122/100379    | 03-Jan-2022  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | CME    | 030122/100378    | 03-Jan-2022  | Draft     |        |

Figure 8-80

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details



## 8.7.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 61     | Bhawana Sewa Sansthan | NMPB-E | 221221/100349    | 22-Dec-2021  | Draft     |        |
| 62     | Bhawana Sewa Sansthan | CME    | 221221/100348    | 22-Dec-2021  | Draft     |        |
| 63     | Bhawana Sewa Sansthan | NMPB-E | 221221/100347    | 22-Dec-2021  | Draft     |        |
| 64     | Bhawana Sewa Sansthan | IC-A   | 221221/100346    | 22-Dec-2021  | Draft     |        |
| 65     | Bhawana Sewa Sansthan | NMPB-F |                  |              | mitted    |        |
| 66     | Bhawana Sewa Sansthan | IC-A   |                  |              | proved    |        |
| 67     | Bhawana Sewa Sansthan | IC-E   | 201221/100332    | 20-Dec-2021  | Submitted |        |
| 68     | Bhawana Sewa Sansthan | IC-E   | 201221/100331    | 20-Dec-2021  | Forward   |        |
| 69     | Bhawana Sewa Sansthan | IC-C   | 201221/100330    | 20-Dec-2021  | Submitted |        |
| 70     | Bhawana Sewa Sansthan | IC-B   | 201221/100329    | 20-Dec-2021  | Draft     |        |

Showing 61 to 70 of 160 entries Previous 1 ... 6 7 8 ... 16 Next

Figure 8-81

Click to view & download application

**Component 3(C)(iv):Participation/ organization of International exhibitions/ conferences/workshops/seminars/ road shows/ trade fairs, etc. in India and abroad by the Ministry of AYUSH through Indian Mission/ CII/ FICCI/ ITPO/ ASSOCHAM/Pharmexcil, etc.**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

Click to download application

|   |  |
|---|--|
| Name of the Organization/Company/ Unit etc. | Address  |
| Bhawana Sewa Sansthan                       | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email                                       | Contact No.  |
| prafuljansari@silvertouch.com               | 9090909090   |
| Organization Type                           | Registration Number (if required)                                  |
| Non-Profit Non-Govt. Organisations          | dfh  |
| Registration Date (if required)             | Major activities/ field of the organization                        |
| 09-01-2004                                  | dfgh   |

Figure 8-82

Click [Download Pdf](#) to download application in PDF





## 8.8 Component 3(B) (b): Application for Market authorization of AYUSH products at regulatory bodies of different countries

### 8.8.1 Details of the Organization

**DETAILS OF THE ORGANIZATION**

Name of the Organization/company/Unit etc\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email\*  
prafuljansari@silvertouch.com

Contact No.\*  
9090909090

Organization Type\*  
Non-Profit Non-Govt. Organisations

Registration Number\*  
925/2003-04

Registration Date\*  
09-01-2004

GMP Certificate Number\*

Import Export Certificate(IEC) Number\*

Any Other Information (if any)

Click to save form details and submit later

Click to submit form details

Save Draft Save & Next

Figure 8-83

#### Enter following details:

- Name of the Organization/company/ Unit etc will be displayed automatically
- Address will be displayed automatically
- Email will be displayed automatically
- Contact No will be displayed automatically
- Organization Type will be displayed automatically
- Registration Number (if required): Enter registration number
- Registration Date (if required) will be displayed automatically
- GMP Certificate Number: Enter GMP certificate number
- Import Export Certificate(IEC) Number: Enter import export certificate(IEC) number
- Any Other Information (If any): Enter any other information
- Click **Previous** to go to previous form
- Click **Save Draft** to save details of organization and submit later
- Click **Save & Next** to save details of organization and move to next form



## 8.8.2 Project Details

**PROJECT DETAILS**
▼

**DETAILS OF THE PRODUCTS**

| SI No.*                             | Name of the products*                             | Description of the products*                             | Indian Registration No. of each product*                          | + |
|-------------------------------------|---|--|---|---|
| <input type="text" value="SI No."/> | <input type="text" value="Name of the products"/> | <input type="text" value="Description of the products"/> | <input type="text" value="Indian Registration No. of each proc"/> | + |

**DETAILS OF THE REGULATORY AGENCY**

| Name of the Regulatory agency                              | Country*                            | Any other Information                              | + |
|--|-------------------------------------|--|---|
| <input type="text" value="Name of the Regulatory agency"/> | <input type="text" value="Select"/> | <input type="text" value="Any other Information"/> | + |

Registration no. of the marketing partner/distributor in the foreign country, if any

Whether any grant in aid is being sought/received from any other source including Central Govt./State Govt. for the same purpose\*

Whether grant in aid has been received from Ministry of AYUSH earlier\*

Total expenditure involved in market authorization of the product/products\*

**EXPENDITURE DETAILS**

| Payment to be paid/paid to foreign regulatory authority*             | Payment to reputed International consultant, if any              | Expenditure incurred on preparation of Dossier, if any.            | + |
|--|--|--|---|
| <input type="text" value="Payment to be paid/paid to foreign regu"/> | <input type="text" value="Payment to reputed International co"/> | <input type="text" value="Expenditure incurred on preparation o"/> | + |

Amount sought from Ministry of AYUSH\*

Total Contribution of the organization\*

Any other information, if any

[Click to go to previous form](#)

[Click to save form details and submit later](#)



[Click to submit form details](#)

Figure 8-84

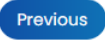
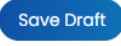

**Enter following details:**

- SI No.:
- Name of the products: Enter name of the product
- Description of the products: Enter description of the product
- Indian Registration No. of each product: Enter Indian registration number of each product
- Click to add more details of the products
- Name of the Regulatory agency: Enter name of the regulatory agency



- Country: Select country from dropdown
- Any other Information: Enter any other information
- Click  to add more details of the regulatory agency
- Registration no. of the marketing partner/distributor in the foreign country, if any: Enter registration no. of the marketing partner/distributor in the foreign country, if any
- Whether any grant in aid is being sought/received from any other source including Central Govt./State Govt. for the same purpose: Select Whether any grant in aid is being sought/received from any other source including Central Govt./State Govt. for the same purpose from dropdown
- If frontend user selects Yes from dropdown, then user has to provide details of funds received/sought from other sources
- Registration no. of the marketing partner/distributor in the foreign country, if any: Enter registration no. of the marketing partner/distributor in the foreign country, if any
- Whether any grant in aid is being sought/received from any other source including Central Govt./State Govt. for the same purpose: Select whether any grant in aid is being sought/received from any other source including Central Govt./State Govt. for the same purpose
- Whether grant in aid has been received from Ministry of AYUSH earlier: Select whether grant in aid has been received from Ministry of AYUSH earlier
- If frontend user select yes from dropdown, then user has to enter total expenditure involved in market authorization of the product/products
- Payment to be paid/paid to foreign regulatory authority : Enter Payment to be paid/paid to foreign regulatory authority
- Payment to reputed International consultant, if any: Enter payment to reputed International consultant, if any
- Expenditure incurred on preparation of Dossier, if any: Enter expenditure incurred on preparation of Dossier, if any
- Click  to add more expenditure details
- Amount sought from Ministry of AYUSH: Enter amount sought from ministry of AYUSH

**Fund/Installment is transferred post submission/approval of monitoring parameters.**

- Total Contribution of the organization towards the activity. (in Rs.): Enter Total Contribution of the organization towards the activity. (in Rs.)
- Any other information relevant to the project (if required): Enter Any other information relevant to the project (if required)
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form




8.8.3 Attachments

**ATTACHMENTS**

**Details of the product(s)\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Details of the Marketing Partner/Distributor in foreign country (if any)**

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Copy of the GMP certificate\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Copy of Import Export Certificate\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Statement of Turnover for the last 03 years\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Years 2\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Years 3\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Details of All Expenditure involved and sought for.\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Appraisal of the Bank if loan is sought for the same activity.**

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Any Other Document(if any)**

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB



Click to go to previous form

Click to save form details and submit later

Click to submit form details

Figure 8-85



## Enter following details:

- Details of the product(s): Click  to upload file
- Details of the Marketing Partner/Distributor in foreign country (if any): Click  to upload file
- Copy of Import Export Certificate: Click  to upload file
- Copy of the GMP certificate: Click  to upload file
- Statement of Turnover for the last 03 years: Click  to upload file
- Years 2: Click  to upload file
- Years 3: Click  to upload file
- Details of All Expenditure involved and sought for: Click  to upload file
- Appraisal of the Bank if loan is sought for the same activity: Click  to upload file
- Any Other Document(If any): Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **[Name]**  
Your application NO. 040122/100391 has been submitted successfully for Application For Component 3(B)(b):Application for Market authorization of AYUSH products at regulatory bodies of different countries On Ayush.  
Kindly quote your application NO. 040122/100391 in all future correspondence and keep checking status of your application on your dashboard.  
Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-86

On successful submission of form following message will be displayed:

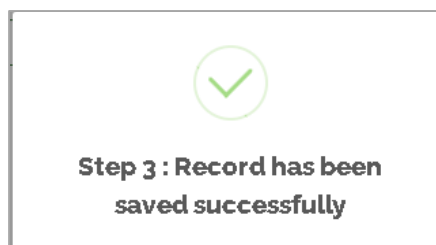


Figure 8-87



### 8.8.4 View Applications

Frontend user can search application by entering search terms in search textbox

Component 3(B) (b): Application for Market authorization of AYUSH products at regulatory bodies of different countries will be displayed with following column headings:

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-C   | 040122/100391    | 04-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-C   | 040122/100390    | 04-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | IC-E   | 040122/100389    | 04-Jan-2022  | Draft     |        |
| 4      | Bhawana Sewa Sansthan | IC-B   | 040122/100388    | 04-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IC-B   | 040122/100387    | 04-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IC-B   | 040122/100386    | 04-Jan-2022  | Draft     |        |
| 7      | Bhawana Sewa Sansthan | IC-D   | 030122/100383    | 03-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | IC-A   | 030122/100382    | 03-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | EMR    | 030122/100381    | 03-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | EMR    | 030122/100380    | 03-Jan-2022  | Draft     |        |

Showing 1 to 10 of 128 entries

Navigation: Previous | 1 | 2 | 3 | 4 | 5 | ... | 13 | Next

*Annotations in the image:*  
- A red box highlights the search input field.  
- A red box highlights the 'Action' column for row 2, with a callout: "Click to view application details" pointing to the eye icon.  
- A red box highlights the 'Action' column for row 5, with a callout: "Click to edit application details" pointing to the pencil icon.

Figure 8-88

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details



## 8.8.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number                     | Created Date | Status    | Action |
|--------|-----------------------|--------|--------------------------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-C   | 040122/100391                        | 04-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-C   | 040122/100390                        | 04-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | IC-E   | Click to view & download application |              | Submitted |        |
| 4      | Bhawana Sewa Sansthan | IC-B   | 040122/100388                        | 04-Jan-2022  | Submitted |        |
| 5      | Bhawana Sewa Sansthan | IC-B   | 040122/100387                        | 04-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IC-B   | 040122/100386                        | 04-Jan-2022  | Draft     |        |
| 7      | Bhawana Sewa Sansthan | IC-D   | 030122/100383                        | 03-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | IC-A   | 030122/100382                        | 03-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | EMR    | 030122/100381                        | 03-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | EMR    | 030122/100380                        | 03-Jan-2022  | Draft     |        |

Showing 1 to 10 of 128 entries

Figure 8-89

Click to view & download application

### Component 3(B)(b): Application for Market authorization of AYUSH products at regulatory bodies of different countries

**DETAILS OF THE ORGANIZATION**

|                                       |                               |  |  |
|---------------------------------------|-------------------------------|--|--|
| Name of the Organization              | Click to download application |  | Address  |
| Bhawana Sewa Sansthan                 |                               |  | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email                                 |                               |  | Contact No.  |
| prafuljansari@silvertouch.com         |                               |  | 9090909090   |
| Organization Type                     |                               |  | Registration Number  |
| Non-Profit Non-Govt. Organisations    |                               |  | 925/2003-04  |
| Registration Date                     |                               |  | GMP Certificate Number   |
| 09-01-2004                            |                               |  | aaa  |
| Import Export Certificate(IEC) Number |                               |  | Any Other Information (if any)                                     |
| aaa                                   |                               |  |  |

Figure 8-90

Click  to download application in PDF



## 8.9 Central Sector Scheme for AYURSWASTHYA

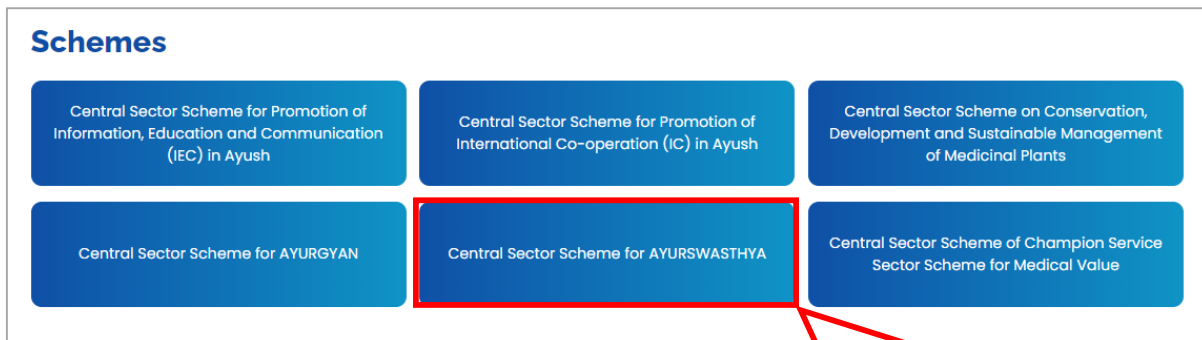


Figure 8-91

There are two main components in this scheme: 1) AYUSH and Public Health / AYUSH and Sports Medicine 2) Up-gradation of Specialities to Centre of Excellence

Under Central Sector Scheme for AYURSWASTHYA, front end user can apply for following components of the scheme:

- 1) AYUSH and Public Health / AYUSH and Sports Medicine
- 2) Up-gradation of Specialities to Centre of Excellence

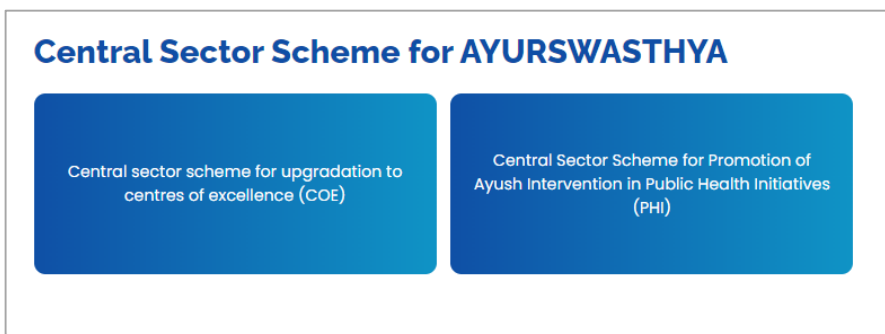


Figure 8-92





## 8.9.1 Up-gradation of Specialities to Centre of Excellence under AYURSWASTHYA YOJANA

### 8.9.1.1 Details of the Organization

#### DETAILS OF THE ORGANIZATION

|   |                               |   |  |
|---|-------------------------------|---|--|
| Name of the organization*   | Bhawana Sewa Sansthan         | Address*  | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Registration Number As per Society Registration Act/Trust/Company Act or any other Act* | 925/2003-04                   | Registration Date*  | 09-01-2004   |
| Contact No.*  | 9090909090                    | Mobile No.*   | 9090909090   |
| Email Address*  | prafuljansari@silvertouch.com | Organization Type*  | Non-Profit Non-Govt. Organisations                                 |
| Details of Non-Profit Organization, Tax Return details (80G) of the organization        |                               | Date of Establishment*  |  |
|   |                               | Darpan ID*  | UP_2017_0116059  |
| PAN Number*   |                               | TAN Number  |  |
| AAAAH3629P  |                               | Details of the signatory as per the company / trust resolution* |  |
| Details of objective of the organization*   |                               | Details of existing infrastructure*                             |  |
|   |                               |   |  |

#### YEAR-WISE FINANCIAL STATUS OF THE ORGANISATION OF LAST FIVE YEARS

| Financial year* | Income (INR)* | Expenditure (INR)* |   |
|-----------------|---------------|--------------------|---|
| Select          | Income (INR)  | Expenditure (INR)  | + |

#### MAJOR EXPERIENCE / ACHIEVEMENT IN RELEVANT FIELD OF AYUSH SECTOR IN LAST 5 YEARS

| Year*  | Achievement* | Description* |   |
|--------|--------------|--------------|---|
| Select | Achievement  | Description  | + |

#### DETAILS/ PROFILE OF PERSONNEL EMPLOYED AND PERSONS IN THE MANAGEMENT COMMITTEE

| Name* | Designation* | Date of Appointment* |   |
|-------|--------------|----------------------|---|
| Name  | Designation  | Date of Appointment  | + |

#### DETAILS OF OWNER OF LAND WITH DETAILS

| Name* | Land* | Possibility of Further expansion of land* |   |
|-------|-------|---|---|
| Name  | Land  |   | + |

Click to submit form details




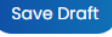
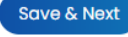
Click to save form details and submit later

Save Draft Save & Next

Figure 8-93



**Enter following details:**

- Name of the Organization will be displayed automatically
- Address will be displayed automatically
- Registration Number As per Society Registration Act/Trust/Company Act or any other Act will be displayed automatically
- Registration Date will be displayed automatically
- Contact No will be displayed automatically
- Mobile No will be displayed automatically
- Email Address will be displayed automatically
- Organization Type will be displayed automatically
- Details of Non-Profit Organization, Tax Return details (80G) of the organization: Enter details of non-profit organization, tax return details (80G) of the organization
- Darpan ID: Will be displayed automatically
- TAN Number: Enter TAN number
- PAN Number: Enter PAN number
- Details of the signatory as per the company / trust resolution: Enter details of the signatory as per the company / trust resolution
- Details of objective of the organization: Enter details of objective of the organization
- Details of existing infrastructure: Enter details of existing infrastructure
- Financial year: Select financial year from dropdown
- Income (INR): Enter Income (INR)
- Expenditure (INR): Enter Expenditure (INR)
- Click  to add more year-wise financial status of the organization of last five years
- Year: Select year from dropdown
- Achievement: Enter achievement
- Description: Enter description
- Name: Enter name
- Designation: Enter designation
- Date of Appointment: Enter date of appointment
- Click  to add more details/ profile of personnel employed and persons in the management committee
- Name: Enter name
- Land: Enter land
- Possibility of Further expansion of land: Enter possibility of further expansion of land
- Click  to add more details of owner of land with details
- Click  to save details of organization and submit later
- Click  to save details of organization and move to next form



8.9.1.2 Project Details

**PROJECT DETAILS**

**DETAILS OF COE PROJECT IMPLEMENTATION TEAM**

| Name*                | Role*                |                                  |
|----------------------|----------------------|----------------------------------|
| <input type="text"/> | <input type="text"/> | <input type="button" value="+"/> |

Whether any grant-in-aid has been received from Central Government/ State Government/Foreign Government, if so, the details of the grant released\*

Yes  No

Details of Area (s) to be covered under the project, like state, district and block\*

Total Amount Sought from the Ministry of Ayush\*

**DETAILS OF EXPECTED DELIVERABLES AT THE END OF THE PROJECT**

| Deliverable name*    | Deliverable date (Possible Date / Time Required)* |                                  |
|----------------------|---|----------------------------------|
| <input type="text"/> | <input type="text"/>                              | <input type="button" value="+"/> |

Amount of Grant in aid required (item wise/component wise)\*

Details of Action Plan for implementation of the project\*

Proposed objectives of excellence and their justification\*

Track record of meritorious accomplishments during the last five years in the proposed activity as a Centre of Excellence\*

Information on National and International awards

Standards to be achieved by the organisation by utilising the Grant with respect to the illustrative list placed at the annexure of the scheme guidelines\*

Expected Outcome/Deliverables at the end of the project\*

Any other relevant information\*

Figure 8-94

Enter following details:

- Name: Enter name
- Role: Enter role
- Click  to add more details of COE project implementation team



- Whether any grant-in-aid has been received from Central Government/ State Government/Foreign Government, if so, the details of the grant released: If frontend user select **Yes**  radio button, then user has to enter following details:
- Details of grant(purpose): Enter details of grant(purpose)
- Financial Year: Select financial year from dropdown
- Amount Received: Enter amount received
- Details of Area (s) to be covered under the project, like state, district and block: Enter Details of Area (s) to be covered under the project, like state, district and block
- Total Amount Sought from the Ministry of Ayush: Enter Total Amount Sought from the Ministry of Ayush
- Deliverable name: Enter Deliverable name
- Deliverable date (Possible Date / Time Required): Deliverable date (Possible Date / Time Required)
- Click  to add more details of expected deliverables at the end of the project
- Amount of Grant in aid required (item wise/component wise): Enter amount of grant in aid required
- Details of Action Plan for implementation of the project: Enter Details of Action Plan for implementation of the project
- Proposed objectives of excellence and their justification: Enter proposed objectives of excellence and their justification
- Track record of meritorious accomplishments during the last five years in the proposed activity as a Centre of Excellence: Enter track record of meritorious accomplishments during the last five years in the proposed activity as a centre of excellence
- Information on National and international awards: Enter information on national and international awards
- Standards to be achieved by the organisation by utilising the Grant with respect to the illustrative list placed at the annexure of the scheme guidelines: Enter Standards to be achieved by the organisation by utilizing the Grant with respect to the illustrative list placed at the annexure of the scheme guidelines
- Expected Outcome/Deliverables at the end of the project: Enter expected outcome/deliverables at the end of the project
- Any other relevant information: Enter any other relevant information
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form




## 8.9.1.3 Attachments

### ATTACHMENTS

**Copy of DPR\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Copy of Concept Note\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Attested copy of the Registration Certificate in case of Non-Governmental Organisation / Institutes per companies / society / trust / any other act\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**ATTESTED COPY OF THE AUDITED STATEMENT OF ACCOUNT FOR THE LAST 3 SUCCESSIVE YEARS**

| Year*  | Attachment*   |                                  |
|--------|---|----------------------------------|
| Select | <input type="button" value="Choose File"/> No file chosen | <input type="button" value="+"/> |


Allowed pdf formats.  
Optimal Size : 2MB



**Attested copy of By-laws of the organization in case of Non-Governmental Organisation / Institute\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**A note of past activities especially those related to AYUSH Sector development\***

No file chosen


Allowed pdf formats.  
Optimal Size : 2MB



**Attested copy of the Memorandum of Association in case of Non-Governmental Organisation / Institute\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB



**Detailed note on the Organization's plan giving component-wise details of activities envisaged under the project proposal\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB




Figure 8-95



# आयुष मंत्रालय Ministry of Ayush













|  |   |
|--|---|
| <p><b>Detailed statement indicating grant-in-aid received from any organisations/Govt. Departments in the past*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>             | <p><b>Track record of meritorious accomplishments during the last - five years*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>    |
| <p><b>Profile of available staff and infrastructure*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>    | <p><b>Current infrastructure available with the Organisation along with details of the proposed desired infrastructure*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>    |
| <p><b>Details of top 5 specialization areas of the applicant Organisation*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>    | <p><b>Details of the current OPD, IPD and equipments available with the organisation and, details of the OPD &amp; IPD numbers which the applicant wants to achieve. Also, details of equipments which the Organisation wants to upgrade to</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>  |
| <p><b>Details of Non-profit organisation, Tax Return details (80G) of the organisation*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>                                   | <p><b>Latest Copy of bank statement of the organization in case of non-governmental organization(6 month)*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>   |
| <p><b>List of publications, if any</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>    | <p><b>Copy of documents supporting previous track record of working in the field of the proposed excellence*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>   |
| <p><b>Copy of supporting documents claiming the institute as an eminent institute of the state in that particular field*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>  | <p><b>Copy of utilization certificate for any assistance taken from Central/State Government/Foreign Government, if any*</b></p> <p><input type="button" value="Choose File"/> No file chosen</p> <p>Allowed pdf formats.<br/>Optimal Size : 2MB</p>   |

Figure 8-96



Recommendation of state Ayush directorate as per scheme guidelines\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

National and International awards, if any

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

MoU with International / National Institutes

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of Undertaking as per scheme guideline\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of Certificate abiding to terms and Conditions\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Deliverables (Year wise)\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Amount of Grant in aid required (item wise/component wise)\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Details of expected deliverables at the end of the project\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to submit form details

Previous

Click to save form details and submit later

Save Draft

Submit

Figure 8-97

**Enter following details:**

- Copy of DPR: Click  to upload file
- a Copy of Concept Note: Click  to upload file
- Attested copy of the Registration Certificate in case of Non-Governmental Organisation / institute as per companies / society / trust / any other act: Click  to upload file
- Year: Select year from dropdown
- Attachment: Click  to upload file
- Click  to add Attested Copy of the Audited Statement of Account for the last 3 Successive Years
- Attested copy of By-laws of the organization in case of Non-Governmental Organisation / institute: Click  to upload file
- A note of past activities especially those related to AYUSH Sector development: Click  to upload file
- Attested copy of the Memorandum of Association in case of Non-Governmental Organisation / institute: Click  to upload file
- Detailed note on the Organization's plan giving component-wise details of activities envisaged under the project proposal: Click  to upload file
- Detailed statement indicating grant-in-aid received from any organisations/Govt. Departments in the past: Click  to upload file



- Track record of meritorious accomplishments during the last - five years: Click  to upload file
- Profile of available staff and infrastructure: Click  to upload file
- Current infrastructure available with the organisation along with details of the proposed desired infrastructure: Click  to upload file
- Details of top 5 specialization areas of the applicant organisation: Click  to upload file
- Details of the current OPD, IPD and equipment available with the organisation and, details of the OPD & IPD numbers which the applicant wants to achieve. Also, details of equipment which the organisation wants to upgrade to: Click  to upload file
- Details of Non-profit organisation, Tax Return details (80G) of the organisation: Click  to upload file
- Latest Copy of bank statement of the organization in case of non-governmental organization(6 month): Click  to upload file
- List of publications, if any: Click  to upload file
- Copy of documents supporting previous track record of working in the field of the proposed excellence: Click  to upload file
- Copy of supporting documents claiming the institute as an eminent institute of the state in that particular field: Click  to upload file
- Copy of utilization certificate for any assistance taken from Central/State Government/Foreign Government, if any: Click  to upload file
- Recommendation of state Ayush directorate as per scheme guidelines: Click  to upload file
- National and international awards, if any: Click  to upload file
- MoU with International / National Institutes: Click  to upload file
- Copy of Undertaking as per scheme guideline: Click  to upload file
- Copy of Certificate abiding to terms and Conditions: Click  to upload file
- Deliverables (Year wise): Click  to upload file
- Amount of Grant in aid required (item wise/component wise): Click  to upload file
- Details of expected deliverables at the end of the project: Click  to upload file
- Click  to save attachments and submit later
- Click  to submit form details





Once the application is successfully submitted, frontend user will receive email from respective organization

Dear [REDACTED]

Your application No.040122/100362 has been successfully submitted for seeking grant in aid support under Up-gradation of Specialities to Centre of Excellence component of AYURSWASTHYA YOJANA (Central Sector Scheme, Ministry of Ayush)

Kindly quote your application NO. 040122/100362 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-98

On successful submission of form following message will be displayed:

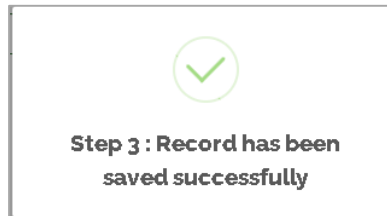














Figure 8-99



8.9.1.4 View Applications

Frontend user can search application by entering search terms in search textbox



Up-gradation of Specialities to Centre of Excellence (COE) under AYURSWASTHYA YOJANA will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action  |
|--------|-----------------------|--------|------------------|--------------|-----------|---|
| 1      | Bhawana Sewa Sansthan | COE    | 040122/100392    | 04-Jan-2022  | Draft     |   |
| 2      | Bhawana Sewa Sansthan | IC-C   | 040122/100391    | 04-Jan-2022  | Submitted |    |
| 3      | Bhawana Sewa Sansthan | IC-C   | 040122/100390    | 04-Jan-2022  | Submitted |    |
| 4      | Bhawana Sewa Sansthan | IC-E   | 040122/100389    | 04-Jan-2022  | Submitted |    |
| 5      | Bhawana Sewa Sansthan | IC-B   | 040122/100388    | 04-Jan-2022  | Submitted |    |
| 6      | Bhawana Sewa Sansthan | IC-B   | 040122/100387    | 04-Jan-2022  | Submitted |    |
| 7      | Bhawana Sewa Sansthan | IC-B   | 040122/100386    | 04-Jan-2022  | Draft     |   |
| 8      | Bhawana Sewa Sansthan | IC-D   | 030122/100383    | 03-Jan-2022  | Submitted |    |
| 9      | Bhawana Sewa Sansthan | IC-A   | 030122/100382    | 03-Jan-2022  | Submitted |   |
| 10     | Bhawana Sewa Sansthan | EMR    | 030122/100381    | 03-Jan-2022  | Submitted |    |

Showing 1 to 10 of 129 entries

Previous 1 2 3 4 5 ... 13 Next

Figure 8-100

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
  - Click  (details) to view application details
  - Click  (edit) to edit application details



## 8.9.1.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 11     | Bhawana Sewa Sansthan | IC-D   | 310122/100459    | 31-Jan-2022  | Submitted |        |
| 12     | Bhawana Sewa Sansthan | COE    | 280122/100450    | 28-Jan-2022  | Submitted |        |
| 13     | Bhawana Sewa Sansthan | NMPB-D | 280122/100449    | 28-Jan-2022  | Submitted |        |
| 14     | Bhawana Sewa Sansthan | IEC-B  | 270122/100448    | 27-Jan-2022  | Submitted |        |
| 15     | Bhawana Sewa Sansthan | IC-A   | 270122/100447    | 27-Jan-2022  | Approved  |        |
| 16     | Bhawana Sewa Sansthan | NMPB-F | 270122/100446    | 27-Jan-2022  | Submitted |        |
| 17     | Bhawana Sewa Sansthan | NMPB-C | 270122/100445    | 27-Jan-2022  | Draft     |        |
| 18     | Bhawana Sewa Sansthan | NMPB-A | 270122/100444    | 27-Jan-2022  | Forward   |        |
| 19     | Bhawana Sewa Sansthan | NMPB-F | 250122/100443    | 25-Jan-2022  | Forward   |        |
| 20     | Bhawana Sewa Sansthan | NMPB-E | 250122/100442    | 25-Jan-2022  | Rejected  |        |

Showing 11 to 20 of 160 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[16](#)
[Next](#)

Figure 8-101

Click to view & download application

**Central sector scheme for upgradation to centres of excellence (COE)**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

Name of the organization: [Click to download application](#)  
Bhawana Sewa Sansthan

Address: 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Registration Number As per Society Registration Act/Trust/Company Act or any other Act: 925/2003-04

Registration Date: 09-01-2004

Contact No.: 9090909090

Mobile No.: 9090909090

Email Address: praful.jansari@silvertouch.com

Organization Type: Non-Profit Non-Govt. Organisations

Date of Establishment: 04-01-2022

Details of Non-Profit Organization, Tax Return details (80G) of the organization: sdsd

Figure 8-102

Click [Download Pdf](#) to download application in PDF



## 8.9.2 AYUSH and Public Health (PHI)/ AYUSH and Sports Medicine under AYURSWASTHYA YOJANA

### 8.9.2.1 Details of the Organization

#### DETAILS OF THE ORGANIZATION

**Name of the organization\***  
Bhawana Sewa Sansthan

**Address\***  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

**Registration Number As per Society Registration Act/Trust/Company Act or any other Act Number\***  
925/2003-04

**Registration Date\***  
09-01-2004

**Contact No.\***  
9090909090

**Mobile No.\***  
9090909090

**Email Address\***  
prafuljansari@silvertouch.com

**Organization Type\***  
Non-Profit Non-Govt. Organisations

**Date of establishment\***

#### ABSTRACT OF AUDITED ANNUAL ACCOUNTS IN LAST FIVE YEARS

| Financial year* | Income (INR)* | Expenditure (INR)* |   |
|-----------------|---------------|--------------------|---|
| Select          | Income (INR)  | Expenditure (INR)  | + |

**PAN No.\***  
AAAAH3629P

**TAN No.**

**Darpan ID\***  
UP\_2017\_0116059

#### MAJOR ACHIEVEMENTS IN LAST FIVE YEARS

| Major achievements of the organization (in brief)* | Details* | Year*  |   |
|--|----------|--------|---|
| Major achievements of the organization (in brief)  | Details  | Select | + |

**Objective of the organization\***

**Information on National**

Click to submit form details



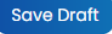
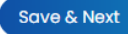
Click to save form details and submit later

Save Draft Save & Next

Figure 8-103



**Enter following details:**

- Name of the Organization will be displayed automatically
- Address will be displayed automatically
- Registration Number As per Society Registration Act/Trust/Company Act or any other Act will be displayed automatically
- Registration Date will be displayed automatically
- Contact No will be displayed automatically
- Mobile No will be displayed automatically
- Email Address will be displayed automatically
- Organization Type will be displayed automatically
- Date of establishment: Enter date of establishment
- Financial year: Select financial year
- Income (INR): Enter income
- Expenditure (INR): Enter expenditure (INR)
- Click  to add abstract of audited annual accounts in last five years
- PAN No: Enter PAN number
- TAN No: Enter TAN number
- Darpan ID: Enter Darpan ID
- Major achievements of the organization (in brief): Enter Major achievements of the organization (in brief)
- Details: Enter details
- Year: Select year from dropdown
- Click  to add major achievements in last five years
- Objective of the organization: Enter objective of the organization
- Information on National and International Award: Enter information on national and international award
- Click  to save details of organization and submit later
- Click  to save details of organization and move to next form



8.9.2.2 Project Details

**PROJECT DETAILS** ▼

|  |  |
|--|--|
| <b>Title of the proposed project*</b>  | <b>Details of the project objectives*</b>                |
| <input type="text"/>   | <input type="text"/>                                     |
| <b>Details of the project goals*</b>   |  |
| <input type="text"/>   |  |
| <b>Details of the project objectives*</b>                                    |  |
| <b>Target Population*</b>  | <b>No Of Population to Cover*</b>                        |
| <input type="text" value="Target Population"/>                               | <input type="text" value="No Of Population to Cover"/>   |
| <b>Number of beneficiaries*</b>  | <b>Target disease/problem*</b>                           |
| <input type="text" value="Number of beneficiaries"/>                         | <input type="text" value="Target disease/problem"/>      |
| <b>Project area ( Block, taluka/ tehsil/ district)*</b>                      | <b>Details of base line survey*</b>                      |
| <input type="text" value="Project area ( Block, taluka/ tehsil/ district)"/> | <input type="text" value="Details of base line survey"/> |
| <b>Action Plan in short*</b>   | <b>Details of end line survey*</b>                       |
| <input type="text" value="Action Plan in short"/>                            | <input type="text" value="Details of end line survey"/>  |
| <b>Deliverables of the project*</b>  | <b>Action Plan in Detail*</b>                            |
| <input type="text" value="Deliverables of the project"/>                     | <input type="text" value="Choose File No file chosen"/>  |

Allowed pdf formats.  
Optimal Size : 25MB




Figure 8-104



**DETAILS OF TECHNICAL PERSONAL HAVING EXPERIENCE IN COMMUNITY/ PUBLIC HEALTH**

|  |  |   |  |
|--|--|---|--|
| 1. Name*<br>2. DOB*<br>3. Current Position*  | 1. Specialization*<br>2. Qualifications*<br>3. Email Address*  | 1. Mobile number*<br>2. Upload CV of Technical Personnel*<br><input type="button" value="Choose File"/> No file chosen<br><small>Allowed pdf formats.<br/>Optimal Size : 25MB</small> | <input style="float: right;" type="button" value="+"/> |
| <input type="text" value="Name"/><br><input type="text" value="DOB"/><br><input type="text" value="Current Position"/> | <input type="text" value="Specialization"/><br><input type="text" value="Qualifications"/><br><input type="text" value="Email Address"/> | <input type="text" value="Mobile number"/><br><input type="button" value="Choose File"/> No file chosen<br>   |  |

**DETAILS OF THE PAST EXPERIENCE OF THE ORGANIZATION/DEPARTMENT**

|   |   |  |
|---|---|--|
| Name of the department*                             | Specialization*                             | <input style="float: right;" type="button" value="+"/> |
| <input type="text" value="Name of the department"/> | <input type="text" value="Specialization"/> |  |

**DETAILS OF PAST EXPERIENCE IN ORGANIZING SUCH PROGRAMMES**

|  |  |
|--|--|
| Details of past experience to conduct similar project*                             | <input style="float: right;" type="button" value="+"/> |
| <input type="text" value="Details of past experience to conduct similar project"/> |  |

Figure 8-105

**Whether any grant-in-aid has been received from the Ministry of Ayush earlier\***

Yes  No

**Details of any grant received from any other central/State government\***

|   |   |
|---|---|
| <b>From Central Govt.*</b><br><input type="text" value="From Central Govt."/> | <b>From State Govt.*</b><br><input type="text" value="From State Govt."/> |
|---|---|

**Total amount sought from the Ministry of Ayush\***

**Details outlining expected outcomes of the project (should be specific, quantifiable clear, comparable at the end of the project)\***

**Details of budget with justification of each component\***

**Justification as to why organization is keen to undertake this project with their vision\***

**Details of budget with justification of each component attachment\***  
 No file chosen  
Allowed pdf formats.  
Optimal Size : 25MB

**Any other relevant information\***

Figure 8-106



**Enter following details:**

- Title of the proposed project: Enter title of the proposed project
- Details of the project objectives: Enter details of the project objectives
- Details of the project goals: Enter details of the project goals
- Target Population: Enter target population:
- No Of Population to Cover: Enter no of Population to cover:
- Number of beneficiaries: Enter Number of beneficiaries:
- Target disease/problem: Enter Target disease/problem
- Project area ( Block, taluka/ tehsil/ district): Enter project area ( Block, taluka/ tehsil/ district)
- Details of base line survey: Enter details of base line survey
- Action Plan in short: Enter action Plan in short
- Details of end line survey: Enter details of end line survey
- Deliverables of the project: Enter deliverables of the project
- Action Plan in Detail:
- Click  to upload file
- Name of the department: Enter name of the department
- Specialization: Enter specialization
- Click  to add more details of details of the past experience of the organization/department
- Details of past experience to conduct similar project: Enter details of past experience to conduct similar project
- Click  to add more details of past experience to conduct similar project
- Whether any grant-in-aid has been received from the Ministry of Ayush earlier
- If frontend user select **Yes**  radio button, then user has to provide details
- From Central Govt.: Enter from central Govt.
- From State Govt.: Enter from state Govt.
- Total amount sought from the Ministry of Ayush: Enter total amount sought from the ministry of Ayush
- Details outlining expected outcomes of the project (should be specific, quantifiable clear, comparable at the end of the project): Enter details outlining expected outcomes of the project (should be specific, quantifiable clear, comparable at the end of the project)
- Details of budget with justification of each component: details of budget with justification of each component
- Justification as to why organization is keen to undertake this project with their vision: Enter Justification as to why organization is keen to undertake this project with their vision
- Details of budget with justification of each component attachment: Enter Details of budget with justification of each component attachment
- Click  to upload file
- Any other relevant information: enter any other relevant information
- Click  to go to previous form





- Click **Save Draft** to save project details and submit later
- Click **Save & Next** to project details and move to next form

### 8.9.2.3 Attachments

#### ATTACHMENTS

Copy of registration certificate (Other than state Government)\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 25MB

**COPY OF AUDITED STATEMENTS OF ACCOUNT FOR LAST 5 YEARS (OTHER THAN STATE GOVERNMENT)**

| Year*  | Attachment*                       |  |
|--------|-----------------------------------|--|
| Select | <b>Choose File</b> No file chosen |  |

Allowed pdf formats.  
Optimal Size : 25MB

Copy of Bye-laws (other than state government)\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 25MB

Copy of certificate abiding to terms and conditions (Annexure B)\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 25MB

State Certificate (Annexure C)

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 25MB

Details of infrastructure available in the organization along with equipment, vehicle etc.\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of bank statement of the organization for last six months (Other than state Government)\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 25MB

Project proposal in details with application format(as per the scheme guidelines)\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 25MB

Major Achievement of the organization in last 5 years (Annual reports)\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 25MB

NGO Certificate\*

**Choose File** No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Previous**

**Save Draft** **Submit**

Click to go to previous form

Click to save form details and submit later

Click to submit form details

Figure 8-107



**Enter following details:**

- Copy of registration certificate (Other than state Government): Click  to upload file
- Year: Select year from dropdown
- Attachment: Click  to upload file
- Copy of Bye-laws (other than state government): Click  to upload file
- Copy of bank statement of the organization for last six months (Other than state Government): Click  to upload file
- Copy of certificate abiding to terms and conditions (Annexure B): Click  to upload file
- Project proposal in details with application format(as per the scheme guidelines): Click  to upload file
- State Certificate (Annexure C): Click  to upload file
- Major Achievement of the organization in last 5 years (Annual reports): Click  to upload file
- Details of infrastructure available in the organization along with equipment, vehicle etc.: Click  to upload file
- NGO Certificate: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear [REDACTED]

Your application No.040122/100394 has been successfully submitted for seeking grant in aid support under Up-gradation of Specialities to Centre of Excellence component of AYURSWASTHYA YOJANA (Central Sector Scheme, Ministry of Ayush)

Kindly quote your application NO. 040122/100394 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-108



On successful submission of form following message will be displayed:

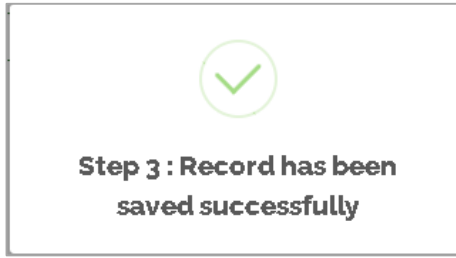


Figure 8-109

#### 8.9.2.4 View Applications

Frontend user can search application by entering search terms in search textbox

AYUSH and Public Health (PHI) under AYURSWASTHYA YOJANA will be displayed with following column headings:

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | PHI    | 040122/100394    | 04-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | PHI    | 040122/100393    | 04-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | COE    | 040122/100392    | 04-Jan-2022  | Draft     |        |
| 4      | Bhawana Sewa Sansthan | IC-C   | 040122/100391    | 04-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | IC-C   | 040122/100390    | 04-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IC-E   | 040122/100389    | 04-Jan-2022  | Draft     |        |
| 7      | Bhawana Sewa Sansthan | IC-B   | 040122/100388    | 04-Jan-2022  | Draft     |        |
| 8      | Bhawana Sewa Sansthan | IC-B   | 040122/100387    | 04-Jan-2022  | Draft     |        |
| 9      | Bhawana Sewa Sansthan | IC-B   | 040122/100386    | 04-Jan-2022  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | IC-D   | 030122/100383    | 03-Jan-2022  | Submitted |        |

Showing 1 to 10 of 131 entries

Figure 8-110

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details



8.9.2.5 Download application

**Applications**

Show 10 entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | PHI    | 040122/100394    | 04-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | PHI    | 040122/100393    | 04-Jan-2022  | Submitted |        |
| 3      | Bhawana Sewa Sansthan | COE    | 040122/100392    | 04-Jan-2022  | Submitted |        |
| 4      | Bhawana Sewa Sansthan | IC-C   | 040122/100391    | 04-Jan-2022  | Submitted |        |
| 5      | Bhawana Sewa Sansthan | IC-C   | 040122/100390    | 04-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IC-E   | 040122/100389    | 04-Jan-2022  | Submitted |        |
| 7      | Bhawana Sewa Sansthan | IC-B   | 040122/100388    | 04-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | IC-B   | 040122/100387    | 04-Jan-2022  | Draft     |        |
| 9      | Bhawana Sewa Sansthan | IC-B   | 040122/100386    | 04-Jan-2022  | Draft     |        |
| 10     | Bhawana Sewa Sansthan | IC-D   | 030122/100383    | 03-Jan-2022  | Submitted |        |

Showing 1 to 10 of 131 entries

Previous 1 2 3 4 5 ... 14 Next

Figure 8-111

Click to view & download application

**Central Sector Scheme for Promotion of Ayush Intervention in Public Health Initiatives (PHI)**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

Click to download application

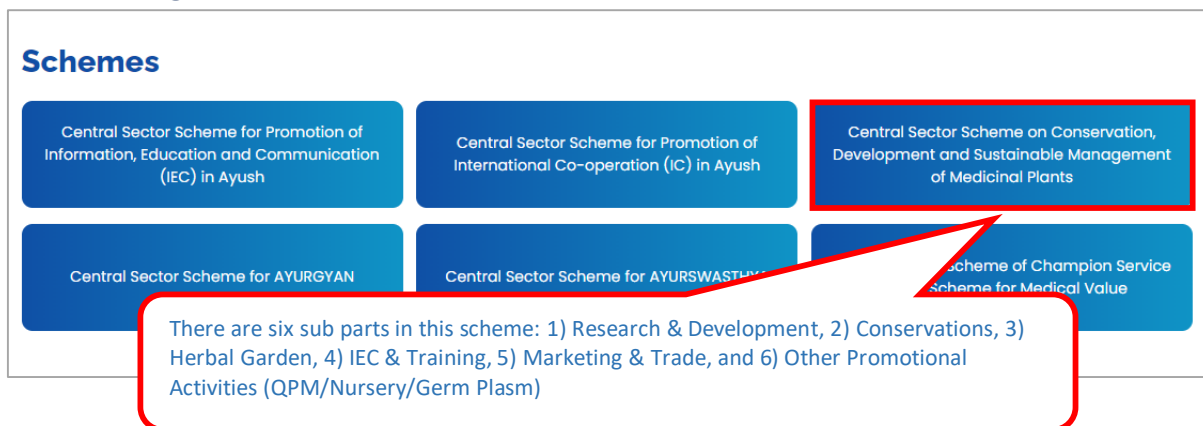
|   |                                |                   |  |
|---|--------------------------------|-------------------|--|
| Name of the organization  | Bhawana Sewa Sansthan          | Address           | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Registration Number As per Society Registration Act/Trust/Company Act or any other Act Number | 925/2003-04                    | Registration Date | 09-01-2004   |
| Contact No.   | 9090909090                     | Mobile No.        | 9090909090   |
| Email Address   | praful.jansari@silvertouch.com | Organization Type | Non-Profit Non-Govt. Organisations                                 |

Figure 8-112

Click [Download Pdf](#) to download application in PDF



## 8.10 Central Sector Scheme on Conservation, Development and Sustainable Management of Medicinal Plants



Under Central Sector Scheme on Conservation, Development and Sustainable Management of Medicinal Plants, frontend user can apply for following schemes:

- Research & Development
- Conservations
- Herbal Garden
- IEC & Training
- Marketing & Trade
- Other Promotional Activities (QPM/Nursery/Germ Plasm)



Figure 8-114

### 8.10.1 Short Names for scheme

| Scheme Name            | Short Name |
|------------------------|------------|
| Research & Development | NMPB A     |
| Conservations          | NMPB B     |
| Herbal Garden          | NMPB C     |
| IEC & Training         | NMPB D     |
| Marketing & Trade      | NMPB E     |



| Scheme Name   | Short Name |
|---|------------|
| Other Promotional Activities (QPM/Nursery/Germ Plasm) | NMPB F     |

### 8.10.2 Research & Development

#### 8.10.2.1 Organization Details

#### ORGANIZATION DETAILS

Name Of The Organization\* Address\*  
Bhawana Sewa Sansthan 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email Address\* Contact No.\*  
prafuljansari@silvertouch.com 9090909090

Registration Number\* Registration Date\*  
09-01-2004

Year Of Establishment Organization Type\*  
Non-Profit Non-Govt. Organisations

Darpan ID\* PAN Number\*  
UP\_2017\_0116059 AAAAH3629P

TAN Number

MAJOR ACHIEVEMENTS IN LAST FIVE YEARS

| Achievement* | Achievement Details* | Year* |   |
|--------------|----------------------|-------|---|
| Achievement  | Achievement Details  |       | + |

Click to save form details and submit later

Click to submit form details

Save Draft Save & Next

Figure 8-115

#### Enter following details:

- Name of the organization will be displayed automatically
- Address will be displayed automatically
- Email Address will be displayed automatically
- Contact No will be displayed automatically
- Registration Number: Enter registration number
- Registration Date will be displayed automatically
- Year Of Establishment: Select year of establishment from dropdown
- Organization Type: Select organization type form dropdown
- Darpan ID will be displayed automatically
- PAN Number will be displayed automatically
- TAN Number: Enter TAN number
- Achievement Details: Enter achievement details



- Year: Select year from dropdown
- Click **+** to add more details of major achievements in last five years
- Click **Save Draft** to save organization details and submit later
- Click **Save & Next** to save organization details and move to next form

## 8.10.2.2 Project Details

### PROJECT DETAILS

Title Of The Proposed Project\*

Duration Of Project\*

From Date\*  To Date\*

#### STUDIED PLANTS DETAILS

| Botanical Name*                             | Synonym*                             | Vernacular Name*                             | Category*                             |          |
|---|--------------------------------------|--|---------------------------------------|----------|
| <input type="text" value="Botanical Name"/> | <input type="text" value="Synonym"/> | <input type="text" value="Vernacular Name"/> | <input type="text" value="Category"/> | <b>+</b> |

Details Of Anticipated Products And Processes\*



Detailed Summary Of The Project\*

#### INVESTIGATOR DETAILS


| 1. Investigator Name*                          | 1. Date Of Superannuation*<br>2. Designation*       | 1. Name Of Institute/Organization*<br>2. Address*<br>3. Email Address* | 1. Mobile No.*<br>2. No. Of Ongoing Research*<br>3. Copy Of Bio-data<br>4. Scanned Copy Of Signature |          |
|--|---|--|--|----------|
| <input type="text" value="Investigator Name"/> | <input type="text" value="Date Of Superannuation"/> | <input type="text" value="Name Of Institute/Organization"/>            | <input type="text" value="Mobile No."/>  | <b>+</b> |

Figure 8-116



|               |                           |               |  |
|---------------|---------------------------|---------------|--|
| Date of Birth | Designation               | Address       | No. Of Ongoing Research  |
| Select        | Area Of Research Interest | Email Address | <input type="button" value="Choose File"/> No file chosen<br>Allowed pdf formats.<br>Optimal Size : 2MB<br> |
|               |                           |               | <input type="button" value="Choose File"/> No file chosen<br>Allowed pdf formats.<br>Optimal Size : 2MB<br> |

**DETAILS OF SIMILAR WORK FUNDED BY ANY OTHER ORGANIZATION**

| Project Name *                            | State * | Funded by *                            | Project Duration *                       | Technical Details *                            | Rationale Of The Study Supported By The Cited * | Copy Of Literature  |                                  |
|---|---------|--|--|--|---|---|----------------------------------|
| <input type="text" value="Project Name"/> | Select  | <input type="text" value="Funded by"/> | <input type="text" value="Project Dui"/> | <input type="text" value="Technical Details"/> | <input type="text" value="Rationale Of The"/>   | <input type="button" value="Choose File"/> N..sen<br>Allowed pdf formats.<br>Optimal Size : 2MB<br> | <input type="button" value="+"/> |

**Hypothesis\***

Figure 8-117





| KEY QUESTIONS  |   |  |  |                   |
|--|---|--|--|-------------------|
| <b>1. Current Status Of The Research And Development In The Subject (International)*</b><br><b>2. Current Status Of The Research And Development In The Subject (National)*</b><br><b>3. Relevance And Expected Outcome Of The Proposed Study*</b> | <b>1. Translational Potential Of The Research Findings*</b><br><b>2. Preliminary Work Done So Far*</b><br><b>3. Specific Objective*</b> | <b>1. Details Of Work Plan*</b><br><b>2. Timelines*</b><br><b>3. Period Of Study*</b><br><b>4. Achievable Targets*</b> |  | <a href="#">+</a> |
| <input type="text" value="Current Status Of The Research And Development In The Subject"/>   | <input type="text" value="Translational Potential Of The Research Findings"/>   | <input type="text" value="Details Of Work Plan"/>  |  |                   |
| <input type="text" value="Current Status Of The Research And Development In The Subject"/>   | <input type="text" value="Preliminary Work Done So Far"/>   | <input type="text" value="Timelines"/>   |  |                   |
| <input type="text" value="Relevance And Expected Outcome Of The Proposed Study"/>  | <input type="text" value="Specific Objective"/>   | <input type="text" value="Period Of Study"/>   |  |                   |
|  |   | <input type="text" value="Achievable Targets"/>  |  |                   |
| BUDGET PARTICULARS NON-RECURRING   |   |  |  |                   |
| Budget Particulars Non-Recurring: Item*  | Year*   | Cost*  | Justification*                             | <a href="#">+</a> |
| <input type="text" value="Budget ParticularsNon-Recurring: Item"/>   | <input type="text" value="Select"/>   | <input type="text" value="Cost"/>  | <input type="text" value="Justification"/> |                   |

Figure 8-118



| BUDGET PARTICULARS RECURRING                         |                                       |                                     |                                     |                                     |  |   |
|--|---------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|---|
| Budget Particulars Recurring: Manpower*              | Position*                             | Number*                             | Year*                               | Amount*                             | Justification*                             | + |
| <input type="text" value="Budget Particulars Recu"/> | <input type="text" value="Position"/> | <input type="text" value="Number"/> | <input type="text" value="Select"/> | <input type="text" value="Amount"/> | <input type="text" value="Justification"/> |   |

| BUDGET PARTICULARS CONSUMABLES                                    |                                       |                                     |   |  |   |
|---|---------------------------------------|-------------------------------------|---|--|---|
| Budget Particulars Consumables: Item*                             | Quantity*                             | Year*                               | Total cost*                             | Justification*                             | + |
| <input type="text" value="Budget Particulars Consumables: Item"/> | <input type="text" value="Quantity"/> | <input type="text" value="Select"/> | <input type="text" value="Total cost"/> | <input type="text" value="Justification"/> |   |

| BUDGET PARTICULARS TRAVEL                                    |                                     |   |  |   |
|--|-------------------------------------|---|--|---|
| Budget Particulars Travel: Item*                             | Year*                               | Total cost*                             | Justification*                             | + |
| <input type="text" value="Budget Particulars Travel: Item"/> | <input type="text" value="Select"/> | <input type="text" value="Total cost"/> | <input type="text" value="Justification"/> |   |

| BUDGET PARTICULARS CONTINGENCY                                    |                                     |   |  |   |
|---|-------------------------------------|---|--|---|
| Budget Particulars Contingency: Item*                             | Year*                               | Total cost*                             | Justification*                             | + |
| <input type="text" value="Budget Particulars Contingency: Item"/> | <input type="text" value="Select"/> | <input type="text" value="Total cost"/> | <input type="text" value="Justification"/> |   |

| BUDGET PARTICULARS OTHERS                                    |                                     |   |  |   |
|--|-------------------------------------|---|--|---|
| Budget Particulars Others: Item*                             | Year*                               | Total cost*                             | Justification*                             | + |
| <input type="text" value="Budget Particulars Others: Item"/> | <input type="text" value="Select"/> | <input type="text" value="Total cost"/> | <input type="text" value="Justification"/> |   |

| EXISTING FACILITY DETAILS  |  |  |   |
|--|--|--|---|
| Existing Facility Details: Manpower*                             | Equipment*                             | Other Resources*                             | + |
| <input type="text" value="Existing Facility Details: Manpower"/> | <input type="text" value="Equipment"/> | <input type="text" value="Other Resources"/> |   |

Whether Any Grant-in-aid Has Been Received From The Ministry Of Ayush Earlier, If Yes Provide Details

Justification As To Why Organization Is Keen To Undertake This Project With Their Vision

Any Other Relevant Information

Previous

Click to go to previous form

Click to save form details and submit later




Click to submit form details

Save Draft





Save & Next







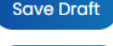
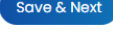
**Enter following details:**

- Title Of The Proposed Project:
- From Date: Select from date
- To Date: Select to date
- Botanical Name: Enter botanical name
- Synonym: Enter synonym
- Vernacular Name: Enter vernacular name
- Category: Enter category
- Click  to add more details of studied plants details
- Details Of Anticipated Products And Processes: Enter details Of anticipated products and processes
- Detailed Summary Of The Project: Enter detailed summary Of the project
- Investigator Name: Enter investigator name
- Date of Birth: Select date of birth from calendar
- Gender: Select gender from dropdown
- Date Of Superannuation: Enter date of Superannuation
- Designation: Enter designation
- Area Of Research Interest: Enter area of research interest
- Name Of Institute/Organization: Enter name of institute/organization
- Address: Enter address
- Email Address: Enter email address
- Mobile No.: Enter mobile number
- No. Of Ongoing Research: Enter number of ongoing research
- Click  to add more investigator details
- Copy Of Bio-data: Click  to upload file
- Copy Of Bio-data: Click  to upload file
- Scanned Copy Of Signature: Click  to upload file
- Project Name: Enter project name
- State: Select state from dropdown
- Funded by: Enter funded by
- Project Duration: Enter project duration
- Technical Details: Enter technical details
- Rationale Of The Study Supported By The Cited: Enter rationale Of the study supported by the cited
- Copy Of Literature: Enter copy of literature
- Click  to add more details of details of similar work funded by any other organization
- Hypothesis: Enter hypothesis
- Current Status Of The Research And Development In The Subject (International): Enter current status Of the research and development in the subject (International)
- Current Status Of The Research And Development In The Subject (National): Enter current status of the research and development in the subject (national)



- Relevance And Expected Outcome Of The Proposed Study: Enter relevance and expected outcome of the proposed study
- Translational Potential Of The Research Findings: Enter translational potential of the research findings
- Preliminary Work Done So Far: Enter preliminary work done so far
- Specific Objective: Enter specific objective
- Details Of Work Plan: Enter details of work plan
- Timelines: Enter timelines
- Period Of Study: Enter period of study
- Achievable Targets: Enter achievable targets
- Budget Particulars Non-Recurring: Item: Enter budget particulars non-recurring item
- Year: Select year from dropdown
- Cost: Enter cost
- Justification: Enter justification
- Click  to add more details of budget particulars non-recurring
- Budget Particular Recurring:
- Budget Particulars Recurring: Manpower: Enter Budget Particulars Recurring: Manpower
- Position: Enter position
- Number: Enter number
- Year: Select year from dropdown
- Amount: Enter amount
- Justification: Enter justification
- Click  to add more details of details budget particulars recurring
- Budget Particulars Consumables:
- Budget Particulars Consumables: Item: Enter budget particulars consumables: item
- Quantity: Enter quantity
- Year: Select year from dropdown
- Total cost: Enter total cost
- Justification: Enter justification
- Click  to add more details of details budget particulars consumables
- Budget Particulars Travel:
- Budget Particulars Travel: Item: Enter budget particulars travel: item
- Year: Select year from dropdown
- Total cost: Enter total cost
- Justification: Enter justification
- Click  to add more details of details budget particulars travel
- Budget Particulars Contingency:
- Budget Particulars Contingency: Item: Enter budget particulars contingency: item
- Year: Select year from dropdown
- Total cost: Enter total cost
- Justification: Enter justification



- Click  to add more details of details budget particulars contingency
- Budget Particulars Others: Item: Enter budget particulars others: item
- Year: Select year from dropdown
- Total cost: Enter total cost
- Justification: Enter justification
- Click  to add more details of details budget particulars others
- Existing Facility Details: Manpower: Enter existing facility details: manpower
- Equipment: Enter equipment
- Other Resources: Enter other resources
- Click  to add more existing facility details
- Whether Any Grant-in-aid Has Been Received From The Ministry Of Ayush Earlier, If Yes Provide Details: Enter whether any grant-in-aid has been received from the ministry of Ayush earlier, if yes provide details
- Justification As To Why Organization Is Keen To Undertake This Project With Their Vision: enter justification as to why organization is keen to undertake this project with their vision
- Any Other Relevant Information: Enter any other relevant information
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form



### 8.10.2.3 Attachments

#### ATTACHMENTS

Copy Of Registration Certificate\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**COPY OF AUDITED STATEMENTS SHOULD BE YEAR WISE**

| Year*                               | Copy Of Audited Statements Of Account For Last 5 Years*   |                                  |
|-------------------------------------|---|----------------------------------|
| <input type="text" value="Select"/> | <input type="button" value="Choose File"/> No file chosen<br>Allowed pdf formats.<br>Optimal Size : 2MB | <input type="button" value="+"/> |

Copy Of Bye-laws Of The Organization\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy Of Bank Statement Of The Organization In Case Of Non-governmental Organization\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy Of Certificate Abiding To Terms And Conditions\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

In Case Annual Report Of The Institution Is Not Published, A Note On Activities During Last Year In Brief May Be Enclosed\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy Of Ethical Clearance Certificate From IEC/IAEC\*

No file chosen

Allowed p  
Optimal Size

[Click to go to previous form](#)

[Click to save form details and submit later](#)

[Click to submit form details](#)

Figure 8-119

#### Enter following details:

- Copy Of Registration Certificate: Click  to upload file
- Year: Select year from dropdown
- Copy Of Audited Statements Of Account For Last 5 Years : Click  to upload file
- Copy Of Bye-laws Of The Organization Click  to upload file
- Copy Of Bank Statement Of The Organization In Case Of Non-governmental Organization: Click  to upload file
- Copy Of Certificate Abiding To Terms And Conditions: Click  to upload file



- In Case Annual Report Of The Institution Is Not Published, A Note On Activities During Last Year In Brief May Be Enclosed: Click  to upload file
- Copy Of Ethical Clearance Certificate From IEC/IAEC: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **Pranav Singh**  
Your application NO.200122/100431 has been submitted successfully for Research & Development On Ayush.

Kindly quote your application NO. 200122/100431 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-120

On successful submission of form following message will be displayed:

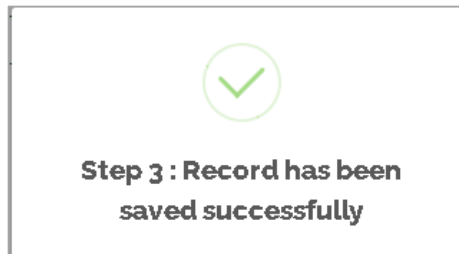


Figure 8-121



### 8.10.2.4 View Applications

Frontend user can search application by entering search terms in search textbox

Research & Development will be displayed with following column headings:

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 11     | Bhawana Sewa Sansthan | NMPB-B | 200122/100431    | 20-Jan-2022  | Submitted |        |
| 12     | Bhawana Sewa Sansthan | NMPB-D | 200122/100430    | 20-Jan-2022  | Submitted |        |
| 13     | Bhawana Sewa Sansthan | NMPB-A | 200122/100429    | 20-Jan-2022  | Submitted |        |
| 14     | Bhawana Sewa Sansthan | EMR    | 190122/100420    |              |           |        |
| 15     | Bhawana Sewa Sansthan | EMR    | 190122/100419    |              |           |        |
| 16     | Bhawana Sewa Sansthan | IEC-B  | 180122/100418    | 18-Jan-2022  | Backward  |        |
| 17     | Bhawana Sewa Sansthan | IEC-A  | 180122/100417    | 18-Jan-2022  | Submitted |        |
| 18     | Bhawana Sewa Sansthan | PHI    | 170122/100416    | 17-Jan-2022  | Forward   |        |
| 19     | Bhawana Sewa Sansthan | PHI    | 170122/100415    | 17-Jan-2022  | Backward  |        |
| 20     | Bhawana Sewa Sansthan | NMPB-D | 100122/100411    | 10-Jan-2022  | Draft     |        |

Showing 11 to 20 of 134 entries

Navigation: Previous 1 2 3 4 5 ... 14 Next

*Note: A red box highlights the search bar, and another red box highlights the eye icon in row 13 with a callout: "Click to view application details".*

Figure 8-122

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details





8.10.2.5 Download application

### Applications

Show  entries Search:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 21     | Bhawana Sewa Sansthan | NMPB-A       | 250122/100441    | 25-Jan-2022  | Rejected  |        |
| 22     | Bhawana Sewa Sansthan | NMPB-A       | 240122/100440    | 24-Jan-2022  | Submitted |        |
| 23     | Bhawana Sewa Sansthan | CSSS-MVT(AH) |                  |              | Submitted |        |
| 24     | Bhawana Sewa Sansthan | CSSS-MVT(AH) |                  |              | Submitted |        |
| 25     | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 240122/100437    | 24-Jan-2022  | Submitted |        |
| 26     | Bhawana Sewa Sansthan | IC-D         | 200122/100428    | 20-Jan-2022  | Submitted |        |
| 27     | Bhawana Sewa Sansthan | IC-A         | 200122/100427    | 20-Jan-2022  | Rejected  |        |
| 28     | Bhawana Sewa Sansthan | IC-A         | 200122/100426    | 20-Jan-2022  | Approved  |        |
| 29     | Bhawana Sewa Sansthan | IEC-B        | 200122/100425    | 20-Jan-2022  | Draft     |        |
| 30     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100423    | 20-Jan-2022  | Forward   |        |

Showing 21 to 30 of 160 entries Previous 1 2 3 4 5 ... 16 Next

Figure 8-123

Click to view & download application

### Research & Development

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#### ORGANIZATION DETAILS

|                          |                                |                   |  |
|--------------------------|--------------------------------|-------------------|--|
| Name Of The Organization | Bhawana Sewa Sansthan          | Address           | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address            | praful.jansari@silvertouch.com | Contact No.       | 9090909090   |
| Registration Number      | 25022A                         | Registration Date | 09-01-2004   |
| Year Of Establishment    |                                | Organization Type | Non-Profit Non-Govt. Organisations                                 |
| PAN Number               | AAAAH3629P                     | TAN Number        | AAAA   |

Figure 8-124

Click [Download Pdf](#) to download application in PDF



### 8.10.3 IEC & Training

#### 8.10.3.1 Details of the Organization

### IEC & Training

**DETAILS OF THE ORGANIZATION**

|                                    |  |
|------------------------------------|--|
| Name of the organization*          | Address*   |
| Bhawana Sewa Sansthan              | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address*                     | Contact Number*  |
| praful.jansari@silvertouch.com     | 9090909090   |
| Registration Number*               | Registration Date*   |
| 925/2003-04                        | 09-01-2004   |
| Date of Establishment*             | Darpan ID*   |
|                                    | UP_2017_0116059  |
| PAN Number*                        | TAN Number*  |
| AAAAH3629P                         |  |
| Organization Type*                 |  |
| Non-Profit Non-Govt. Organisations |  |

Click to submit form details

Click to save form details and submit later

Save Draft Save & Next

Figure 8-125

#### Enter following details:

- Name of the Organization/company/ Unit etc will be displayed automatically
- Address will be displayed automatically
- Email will be displayed automatically
- Contact No will be displayed automatically
- Registration Number (if required): Enter registration number
- Registration Date (if required) will be displayed automatically
- Date of Establishment: Select date of establishment from calendar
- Darpan ID: will be displayed automatically
- PAN Number will be displayed automatically
- TAN Number: Enter TAN number
- Organization Type will be displayed automatically
- Click **Save Draft** to save details of organization and submit later
- Click **Save & Next** to save details of organization and move to next form



## 8.10.3.2 Project Details

**PROJECT DETAILS** ▼

Title of Seminar/Symposium/Conference/Workshop /Training\*

Nature of Training Programme (in case of training) \*

**DETAILS OF ORGANIZING SECRETARY & CONVENER**

| Name*                | Designation*         | Address*             | Pin Code*            | Telephone / Mobile*  | Email Address*       | + |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|---|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |   |

**DETAILS OF SEMINAR/ SYMPOSIUM/ CONFERENCE/ WORKSHOP/ TRAINING**

| Place*               | Tentative Dates*     | From Date*           | To Date*             | + |
|----------------------|----------------------|----------------------|----------------------|---|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |   |

Grant requested from NMPB\*

Work Plan (including Awareness/ Education/ Communication)\*

**PHYSICAL TARGETS**

| Physical targets*    | Course content*      | Date*                | Day*                 | Schedule*            | + |
|----------------------|----------------------|----------------------|----------------------|----------------------|---|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |   |

Figure 8-126



**WHETHER ANY SUCH CONFERENCE/ SEMINAR/ WORKSHOP /TRAINING SPONSORED BY THE NMPB OR ANY OTHER AGENCY CONDUCTED EARLIER AND ITS DETAILS**

| Financial outlays* | Recurring* | Non-Recurring* | Expertise available with the organization* | Outputs and outcomes* | Incremental incomes* | Employment* | Number of beneficiaries* | Gender development* |   |
|--------------------|------------|----------------|--|-----------------------|----------------------|-------------|--------------------------|---------------------|---|
| Finar              | Recurr     | Non-Ri         | Expertise                                  | Output                | Increme              | Employm     | Number o                 | Gender de           | + |

**ADDITIONAL DETAILS**

| 1. Indicate important areas/ topics/ tentative key speakers/ resource persons etc. along with likely list of participants. Indicate confirmed speakers of eminent (National & International)*<br>2. In what way is the Seminar/ Symposium/ Conference/ Workshop/ Trainings expected to contribute to the existing knowledge, particularly in respect of Medicinal Plants sector*<br>3. Has any Association/ Chapter received any earlier grant from NMPB during the last three years for organising Seminar/ Symposium/ Workshop/ Training? If so, give details year-wise and quote the | 1. Year*<br>2. Amount*<br>3. Letter No.*<br>4. Letter Date* | 1. Purpose*<br>2. Name of the Seminar/Symposium*<br>3. Whether U.C. and report submitted*<br>4. Whether UC and other related documents submitted and accepted by NMPB* | 1. What are the tangible benefits that have resulted from previous Seminar/ Symposium/ Workshop/ Training? *<br>2. What is the total expenditure anticipated? Please give head-wise details*<br>3. Clearance obtained from the administrative Ministry, Ministry of Home Affairs and Ministry of External Affairs (in case of international events, keeping in view GOI guidelines on the subject)*<br>4. Details of grant requested/ received from other agencies like DST, DBT, CSIR, UGC, INSA, NAMS and ICAR for the proposed Seminar/ Symposium/ Conference/Workshop* | 1. Name of Agency*<br>2. Grant requested*<br>3. Grant received or expected*<br>4. Items for which grant has been asked for* |   |
|---|---|--|--|---|---|
|   |   |  |  |   | + |

Figure 8-127

Indicate important areas/ topics/

Select

Purpose

What are the tangible benefits that have resulted

Name of Age

Amount

Name of the Seminar/ε

What is the total expenditure anticipated?

Grant reques

Letter No.

Whether U.C. and repor

Choose File No file chosen

Grant receiv

Letter Date

Whether UC and other

Allowed pdf formats. Optimal Size : 2MB

Items for whi

Name of the Associator

Details of grant requested/ received from

[Download SMPB sample recommendation letter](#)

SMPB recommendation letter\*

Choose File No file chosen

Allowed pdf formats. Optimal Size : 2MB

Please indicate the number of N organization for participation in Workshop/ Training\*

Click to submit form details

Click to go to previous form

Click to save form details and submit later

Previous



Save Draft

Save & Next




Figure 8-128

**Enter following details:**

- Title of Seminar/Symposium/Conference/Workshop /Training: Enter title of seminar/symposium/Conference/workshop /training
- Nature of Training Programme (in case of training): Enter nature of training programme (in case of training)
- Name: Enter name
- Designation: Enter designation
- Address: Enter address
- Pin Code: Enter Pincode
- Telephone / Mobile: Enter telephone / mobile
- Email Address: Enter email address
- Click  to add more details of organizing secretary & convener
- Place: Enter place
- Tentative Dates: Select tentative dates from calendar
- From Date: Select from date from calendar
- To Date: Select to date from calendar
- Click  to add more details of seminar/ symposium/ conference/ workshop/ training
- Grant requested from NMPB: Enter grant requested from NMPB
- Work Plan (including Awareness/ Education/ Communication): work plan (including awareness/ education/ communication)
- Physical targets: Enter physical targets
- Course content: Enter course content \*
- Date: Select date from calendar
- Day: Enter day
- Schedule: Enter schedule
- Financial outlays: Enter financial outlays
- Recurring: Enter recurring
- Non-Recurring Enter non-recurring
- Expertise available with the organization: Enter expertise available with the organization
- Outputs and outcomes: Outputs and outcomes
- Incremental incomes: Incremental incomes
- Employment: Enter employment
- Number of beneficiaries: Enter number of beneficiaries
- Gender development: Enter gender development
- Indicate important areas/ topics/ tentative key speakers/ resource persons etc. along with likely list of participants. Indicate confirmed speakers of eminent (National & International): Enter indicate important areas/ topics/ tentative key speakers/ resource persons etc. along with likely list of participants. Indicate confirmed speakers of eminent (National & International)



- In what way is the Seminar/ Symposium/ Conference/ Workshop/ Trainings expected to contribute to the existing knowledge, particularly in respect of Medicinal Plants sector: Enter in what way is the Seminar/ Symposium/ Conference/ Workshop/ Trainings expected to contribute to the existing knowledge, particularly in respect of Medicinal Plants sector
- Has any Association/ Chapter received any earlier grant from NMPB during the last three years for organising Seminar/ Symposium/ Workshop/ Training? If so, give details year-wise and quote the NMPB letter No. and date, in tabular form under the following heads: Enter has any Association/ Chapter received any earlier grant from NMPB during the last three years for organising Seminar/ Symposium/ Workshop/ Training? If so, give details year-wise and quote the NMPB letter No. and date, in tabular form under the following heads
  - Name of the Association: Enter name of the association
  - Year: Enter year
  - Amount: Enter amount
  - Letter No: Enter letter number
  - Letter Date: Select letter date form calendar
  - Purpose: E purpose
  - Name of the Seminar/Symposium: Enter name of the seminar/symposium: Enter name of the Seminar/Symposium: Enter name of the seminar/symposium
  - Whether U.C. and report submitted: Whether U.C. and report submitted: Enter whether U.C. and report submitted: Whether U.C. and report submitted
  - Whether UC and other related documents submitted and accepted by NMPB: Enter whether UC and other related documents submitted and accepted by NMPB
  - What are the tangible benefits that have resulted from previous Seminar/ Symposium/ Workshop/ Training?: Enter what are the tangible benefits that have resulted from previous Seminar/ Symposium/ Workshop/ Training?
  - What is the total expenditure anticipated? Please give head-wise details: Enter what is the total expenditure anticipated? Please give head-wise details
  - Clearance obtained from the administrative ministry, ministry of home affairs and ministry of external affairs (in case of international events, keeping in view GOI guidelines on the subject): Enter clearance obtained from the administrative ministry, ministry of home affairs and ministry of external affairs (in case of international events, keeping in view GOI guidelines on the subject
  - Details of grant requested/ received from other agencies like DST, DBT, CSIR, UGC,INSA, NAMS and ICAR for the proposed Seminar/ Symposium/ Conference/Workshop: Enter details of grant requested/ received from other agencies like DST, DBT, CSIR, UGC,INSA, NAMS and ICAR for the proposed Seminar/ Symposium/ Conference/Workshop
  - Name of Agency: Enter name of agency
  - Grant requested: Enter grant requested
  - Grant received or expected: Enter grant received or expected
  - Items for which grant has been asked for: Enter items for which grant has been asked for
- Click  to add additional details



- Click [Download SMPB sample recommendation letter](#) to download SMPB sample, Frontend user needs to download, sign and upload it before processing further.
- SMPB recommendation letter:
- Click  to upload file
- Please indicate the number of NMPB nominees/ nominees of other organization for participation in the Seminar/ Symposium/ Conference/ Workshop/ Training: Enter please indicate the number of NMPB nominees/ nominees of other organization for participation in the Seminar/ Symposium/ Conference/ Workshop/ Training
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form

### 8.10.3.3 Attachments

**ATTACHMENTS**

Copy of registration certificate\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**COPY OF AUDITED STATEMENTS OF ACCOUNT FOR LAST 3 YEARS**

| Year*  | Attachment*   |                                  |
|--------|---|----------------------------------|
| Select | <input type="button" value="Choose File"/> No file chosen | <input type="button" value="+"/> |

Allowed pdf formats.  
Optimal Size : 2MB

Copy of bye-laws of the organization\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of bank statement of the organization in case of non-governmental organization\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy of certificate abiding to terms and conditions\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to save form details and submit later

Click to submit form details

Figure 8-129



### Enter following details:

- Copy of registration certificate: Click  to upload file
- Year: Select year from dropdown
- Attachment: Click  to upload file
- Copy of bye-laws of the organization: Click  to upload file
- Copy of bank statement of the organization in case of non-governmental organization: Click  to upload file
- Copy of certificate abiding to terms and conditions: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **[Name]**  
Your application NO. 200122/100430 has been submitted successfully for IEC & Training On Ayush.

Kindly quote your application NO. 200122/100430 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-130

On successful submission of form following message will be displayed:

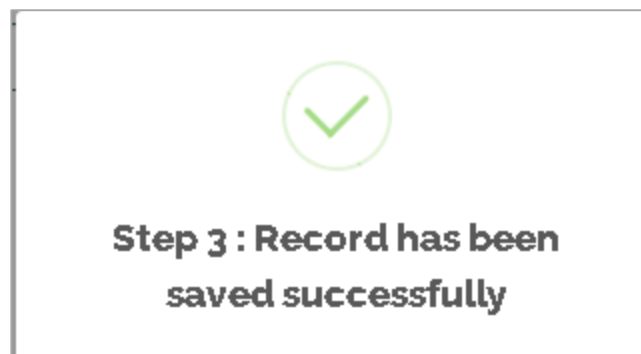


Figure 8-131





### 8.10.3.4 View Applications

Frontend user can search application by entering search terms in search textbox

IEC & Training will be displayed with following column headings:

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 11     | Bhawana Sewa Sansthan | NMPB-B | 200122/100431    | 20-Jan-2022  | Submitted |        |
| 12     | Bhawana Sewa Sansthan | NMPB-D | 200122/100430    | 20-Jan-2022  | Submitted |        |
| 13     | Bhawana Sewa Sansthan | NMPB-A | 200122/100429    |              |           |        |
| 14     | Bhawana Sewa Sansthan | EMR    | 190122/100420    |              |           |        |
| 15     | Bhawana Sewa Sansthan | EMR    | 190122/100419    | 19-Jan-2022  | Forward   |        |
| 16     | Bhawana Sewa Sansthan | IEC-B  | 180122/100418    | 18-Jan-2022  | Backward  |        |
| 17     | Bhawana Sewa Sansthan | IEC-A  | 180122/100417    | 18-Jan-2022  | Submitted |        |
| 18     | Bhawana Sewa Sansthan | PHI    | 170122/100416    | 17-Jan-2022  | Forward   |        |
| 19     | Bhawana Sewa Sansthan | PHI    | 170122/100415    | 17-Jan-2022  | Backward  |        |
| 20     | Bhawana Sewa Sansthan | NMPB-D | 100122/100411    | 10-Jan-2022  | Draft     |        |

Showing 11 to 20 of 134 entries

Previous 1 2 3 4 5 ... 14 Next

*Note: A red box highlights the search input field. A red box highlights the eye icon in the Action column for row 12, with a callout bubble saying "Click to view application details".*

Figure 8-132

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details



## 8.10.3.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 11     | Bhawana Sewa Sansthan | NMPB-B | 200122/100431    | 20-Jan-2022  | Submitted |        |
| 12     | Bhawana Sewa Sansthan | NMPB-D | 200122/100430    | 20-Jan-2022  | Submitted |        |
| 13     | Bhawana Sewa Sansthan | NMPB-A | 200122/100430    | 20-Jan-2022  | Submitted |        |
| 14     | Bhawana Sewa Sansthan | EMR    | 190122/100419    | 19-Jan-2022  | Forward   |        |
| 15     | Bhawana Sewa Sansthan | EMR    | 180122/100418    | 18-Jan-2022  | Backward  |        |
| 16     | Bhawana Sewa Sansthan | IEC-B  | 180122/100417    | 18-Jan-2022  | Submitted |        |
| 17     | Bhawana Sewa Sansthan | IEC-A  | 170122/100416    | 17-Jan-2022  | Forward   |        |
| 18     | Bhawana Sewa Sansthan | PHI    | 170122/100415    | 17-Jan-2022  | Backward  |        |
| 19     | Bhawana Sewa Sansthan | PHI    | 100122/100411    | 10-Jan-2022  | Draft     |        |

Showing 11 to 20 of 134 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[14](#)
[Next](#)

Figure 8-133

Click to view & download application

**IEC & Training**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION**

|                          |                               |                   |  |
|--------------------------|-------------------------------|-------------------|--|
| Name of the organization | Bhawana Sewa Sansthan         | Address           | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address            | prafuljansari@silvertouch.com | Contact Number    | 9090909090   |
| Registration Number      | 925/2003-04                   | Registration Date | 09-01-2004   |
| Date of Establishment    | 18-01-2022                    | PAN Number        | AAAAH3629P   |
| TAN Number               | asas                          | Organization Type | Non-Profit Non-Govt. Organisations                                 |

[Next](#)

Figure 8-134

- Click [Download Pdf](#) to download application in PDF



## 8.10.4 Conservations

### 8.10.4.1 Organization Details

#### ORGANIZATION DETAILS

Name Of The Organization\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email Address\*  
praful.jansari@silvertouch.com

Contact No.\*  
9090909090

Registration Number\*  
925/2003-04

Registration Date\*  
09-01-2004

Year Of Establishment\*

Organization Type\*  
Non-Profit Non-Govt. Organisations

Darpan ID  
UP\_2017\_0116059

PAN Number  
AAAAH3629P

TAN Number\*

MAJOR ACHIEVEMENTS IN LAST FIVE YEARS

| Achievement* | Achievement Details* |                   |
|--------------|----------------------|-------------------|
| Achievement  | Achievement Details  | <a href="#">+</a> |

Click to submit form details

Click to save form details and submit later

Save Draft Save & Next

Figure 8-135

#### Enter following details:

- Name of the organization will be displayed automatically
- Address will be displayed automatically
- Email Address will be displayed automatically
- Contact No will be displayed automatically
- Registration Number: Enter registration number
- Registration Date will be displayed automatically
- Year Of Establishment: Select year of establishment from dropdown
- Organization Type: Select organization type form dropdown
- Darpan ID will be displayed automatically
- PAN Number will be displayed automatically
- TAN Number: Enter TAN number
- Achievement: Enter achievement
- Achievement Details: Enter achievement details
- Click [+](#) to add more details of major achievements in last five years
- Click [Save Draft](#) to save organization details and submit later



- Click [Save & Next](#) to save organization details and move to next form

#### 8.10.4.2 Project Details

**PROJECT DETAILS**

**Project Title\***

**Project Categories\***

**Brief Description Of The Project\***

**Project Area\***

**Details Of Exit Strategy/Sustainability\***

**Project Period (Years)\***

**From Year\***

**To Year\***

**Total Year (s)\***

**Total amount in grant sought from NMPB\***

**Details Physical And Financial Requirements\***

**Details Of Physical Requirements\***

**Details Of Financial Requirements\***

**Details Of Expected Outcome Of The Project\***

Figure 8-136



# आयुष मंत्रालय Ministry of Ayush

| Benefits from the project*  |   |
|---|---|
| <b>Tangible Benefits*</b><br><input type="text" value="Tangible Benefits"/>   | <b>Intangible Benefits*</b><br><input type="text" value="Intangible Benefits"/>   |
| <b>Summary of the work particularly in medicinal plants sector taken by the organization in last 3 years*</b><br><input type="text"/> | <b>Details of financial assistance received from any other source, if any*</b><br><input type="text"/>  |
| <b>Details of Principal Investigator*</b>   |   |
| <b>Name*</b><br><input type="text" value="Name"/>   | <b>DOB*</b><br><input type="text" value="DOB"/>   |
| <b>Date Of Superannuation*</b><br><input type="text" value="Date Of Superannuation"/>   | <b>Designation*</b><br><input type="text" value="Designation"/>   |
| <b>Gender*</b><br><input type="text" value="Select Gender"/>  | <b>Area Of Research Interest*</b><br><input type="text" value="Area Of Research Interest"/>   |
| <b>Name Of Institute/Organization*</b><br><input type="text" value="Name Of Institute/Organization"/>                                 | <b>Address*</b><br><input type="text" value="Address"/>   |
| <b>Email Address*</b><br><input type="text" value="Email Address"/>   | <b>Contact No.*</b><br><input type="text" value="Contact No."/>   |
| <b>No. Of Research Going On*</b><br><input type="text" value="No. Of Research Going On"/>   | <b>Copy Of Bio-Data*</b><br><input type="text" value="Choose File No file chosen"/><br><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small> |


Figure 8-137





Copy Of Scanned Copy Of Signature\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB



**DETAILS OF CO-INVESTIGATOR**

| 1. Name*   | 1. Designation*                                 | 1. Name Of Institute/Organization*                       | 1. Contact No.*                           | 1. Copy Of Bio-Data   | + |
|--|---|--|---|---|---|
| 2. DOB*  | 2. Gender*                                      | 2. Address*  | 2. No. Of Research Going On*              | 2. Copy Of Scanned Copy Of Signature  |   |
| 3. Date Of Superannuation*                         | 3. Area Of Research Interest*                   | 3. Email Address*  |   |   |   |
| <input type="text" value="Name"/>                  | <input type="text" value="Designation"/>        | <input type="text" value="Name Of Institute/Organizat"/> | <input type="text" value="Contact No."/>  | <input type="button" value="Choose File"/> N...en<br>Allowed pdf formats.<br>Optimal Size : 2MB |   |
| <input type="text" value="DOB"/>                   | <input type="text" value="Select"/>             | <input type="text" value="Address"/>                     | <input type="text" value="No. Of Resea"/> |              |   |
| <input type="text" value="Date Of Superannuator"/> | <input type="text" value="Area Of Research I"/> | <input type="text" value="Email Address"/>               |   | <input type="button" value="Choose File"/> N...en<br>Allowed pdf formats.<br>Optimal Size : 2MB |   |
|  |   |  |   |              |   |

Objective Of The Project\*

Justification\*

Figure 8-138

**DETAILS OF FINANCIAL ASSISTANCE RECEIVED FROM THE BOARD, IF ANY**

| Year*                               | Amount of grant*                           | Purpose in brief*                             | Amount of grant utilized*                  | Has utilization certificate been accepted by the board* | Remarks*                             | + |
|-------------------------------------|--|---|--|---|--------------------------------------|---|
| <input type="text" value="Select"/> | <input type="text" value="Amount of gra"/> | <input type="text" value="Purpose in brief"/> | <input type="text" value="Amount of gra"/> | <input type="text" value="Select"/>                     | <input type="text" value="Remarks"/> |   |

Certified that\*

i) The organization shall abide by all the 'Terms and Conditions' of the grant stipulated in the operational guidelines of the scheme of NMPB, Ministry of AYUSH, Government of India.

ii) All records and reports related to the project have been maintained separately and shall be shown and furnished a sand when required by the Ministry of AYUSH or its authorized representatives.

iii) Project shall be open for evaluation of physical progress and utilization of funds at the discretion of Ministry of AYUSH.

iv) The undersigned shall be responsible for the authenticity of the information and documents furnished in the application and proposal.

v) Ministry of AYUSH shall have the right to recover the grant or take legal action against the organization for any default or deviation from the terms and conditions of sanction of grant.

vi) No financial assistance/grant has been sought and or obtained from any Central or State Govt. organization for the same purpose.

vii) It is certified that all applicable laws/rules and legal provisions will be followed while implementing the project.

viii) It is also certified that the project proposal is formulated as per the relevant provisions/ clauses of the guidelines of the Central Sector Scheme for Conservation, Development and Sustainable Management of Medicinal Plants.

Figure 8-139



**DETAILS OF FINANCIAL OUTLAYS(RECURRING)**

| Item*                             | Type*                             | Year*                               | Total Cost*                             | Justification*                             | + |
|-----------------------------------|-----------------------------------|-------------------------------------|---|--|---|
| <input type="text" value="Item"/> | <input type="text" value="Type"/> | <input type="text" value="Select"/> | <input type="text" value="Total Cost"/> | <input type="text" value="Justification"/> |   |

**DETAILS OF FINANCIAL OUTLAYS(NON-RECURRING)**

| Item*                             | Type*                             | Year*                               | Total Cost*                             | Justification*                             | + |
|-----------------------------------|-----------------------------------|-------------------------------------|---|--|---|
| <input type="text" value="Item"/> | <input type="text" value="Type"/> | <input type="text" value="Select"/> | <input type="text" value="Total Cost"/> | <input type="text" value="Justification"/> |   |

[Download SMPB sample recommendation letter](#)

SMPB recommendation letter\*

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to save form details and submit later

Click to submit form details

Figure 8-140

**Enter following details:**

- Project Title: Enter project title
- Project Categories: Select project category from dropdown
- Brief Description Of The Project: Enter brief description Of the project
- Project Area: Enter project area
- Details Of Exit Strategy/Sustainability: Enter details Of exit strategy/sustainability:
- From Year: Select from year from dropdown
- To Year: Select to year from dropdown
- Total Year (s): Enter total years
- Total amount in grant sought from NMPB: Enter total amount in grant sought from NMPB
- Details Of Physical Requirements: Enter details of physical requirements
- Details Of Financial Requirements: Enter details Of financial requirements
- Details Of Expected Outcome Of The Project: Enter details of expected outcome of the Project
- Tangible Benefits: Enter tangible benefits
- Intangible Benefits: Enter intangible benefits
- Summary of the work particularly in medicinal plants sector taken by the organization in last 3 years: Enter summary of the work particularly in medicinal plants sector taken by the organization in last 3 years
- Details of financial assistance received from any other source, if any: Enter details of financial assistance received from any other source, if any





# आयुष मंत्रालय Ministry of Ayush

- Name: Enter name
- DOB: Select DOB from calendar
- Date Of Superannuation: Select date of superannuation from calendar
- Designation: Enter designation
- Gender: Select gender
- Area Of Research Interest: Enter area of research interest
- Name Of Institute/Organization: Enter name of institute/organization
- Address: Enter address
- Email Address: Enter email address
- Contact No: Enter contact number
- Copy Of Bio-Data: Click  to upload file
- Copy Of Scanned Copy Of Signature: Click  to upload file
- Name: Enter name
- DOB: Enter Date of Birth
- Designation: Enter designation
- Gender: Select gender from dropdown
- Area Of Research Interest: Enter area of research interest
- Name Of Institute/Organization: Enter name of institute/organization
- Address: Enter address
- Email Address: Enter email address
- Contact No : Enter contact number
- No. Of Research Going On : Enter number of ongoing research going on
- Copy Of Bio-data: Click  to upload file
- Copy Of Bio-data: Click  to upload file
- Scanned Copy Of Signature: Click  to upload file
- Click  to add more details of co-investigator
- Objective Of The Project: Enter objective of the project
- Justification: Enter justification
- Year: Select year from dropdown
- Amount of grant: Enter amount of grant
- Purpose in brief : Enter purpose of brief
- Amount of grant utilized: Enter amount of grant utilized
- Has utilization certificate been accepted by the board: Select has utilization certificate been accepted by the board Yes No from dropdown
- Remarks: Enter remarks
- Click  to add more details of financial assistance received from the board, if any
- Check **Certified that\***  checkbox
- i) The organization shall abide by all the 'Terms and Conditions' of the grant stipulated in the operational guidelines of the scheme of NMPB, Ministry of AYUSH, Government of India.
- ii) All records and reports related to the project have been maintained separately and shall be shown and furnished a sand when required by the Ministry of AYUSH or its authorized representatives.





- iii) Project shall be open for evaluation of physical progress and utilization of funds at the discretion of Ministry of AYUSH.
- iv) The undersigned shall be responsible for the authenticity of the information and documents furnished in the application and proposal.
- v) Ministry of AYUSH shall have the right to recover the grant or take legal action against the organization for any default or deviation from the terms and conditions of sanction of grant.
- vi) No financial assistance/grant has been sought and or obtained from any Central or State Govt. organization for the same purpose.
- vii) It is certified that all applicable laws/rules and legal provisions will be followed while implementing the project.
- viii) It is also certified that the project proposal is formulated as per the relevant provisions/ clauses of the guidelines of the Central Sector Scheme for Conservation, Development and Sustainable Management of Medicinal Plants.
- Item: Enter item
- Type: Enter type
- Year: Select year from dropdown
- Total Cost: Enter total cost
- Justification: Enter justification
- Click  to add more details of financial outlays(recurring)
- Item: Enter item
- Type: Enter type
- Year: Select year from dropdown
- Total Cost: Enter total cost
- Justification: Enter justification
- Click  to add more details of financial outlays(non-recurring)
- Click [Download SMPB sample recommendation letter](#) to download SMPB sample recommendation letter. Frontend user needs to download, sign and upload it before processing further.



**General Conditions and Undertakings:**

- i. The State Government should give an undertaking that project area has not been covered/is not proposed to be covered under the National Afforestation Programme (NAP) of NAEB or under any other scheme of Central or State Government.
- ii. Cost norms followed, indicating clearly the wage rate in the State, number of plants per hectare and the period for which maintenance is provided in the project (NAEB cost norms will be adopted for NMPB schemes).
- iii. Necessary provisions has been made/will be made in the Working Plan to permit harvesting of plant parts (roots, barks etc.) available under the project.
- iv. Necessary financial support will be provided for maintenance of the assets created under the project after the project period.
- v. Annual report will be submitted by the Project Investigator.
- vi. The State will nominate a senior officer to act as a Nodal Officer.
- vii. It will be our responsibility for regular and periodic monitoring, and to fully cooperate with the monitoring agency engaged by NMPB.

**Signature of the Principal Investigator**

**Dated:**

**Signature of the Head of the Department/Institution**

Figure 8-141

- SMPB recommendation letter:
- Click  to upload file
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form

8.10.4.3 Attachments

- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details



#### 8.10.4.4 View Applications

Frontend user can search application by entering search terms in search textbox

Conversations will be displayed with following column headings:

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 11     | Bhawana Sewa Sansthan | NMPB-B | 200122/100431    | 20-Jan-2022  | Submitted |        |
| 12     | Bhawana Sewa Sansthan | NMPB-D | 200122/100430    | 20-Jan-2022  | Submitted |        |
| 13     | Bhawana Sewa Sansthan | NMPB-A | 200122/100429    | 20-Jan-2022  | Submitted |        |
| 14     | Bhawana Sewa Sansthan | EMR    | 190122/100420    | 19-Jan-2022  | Submitted |        |
| 15     | Bhawana Sewa Sansthan | EMR    | 190122/100419    | 19-Jan-2022  | Forward   |        |
| 16     | Bhawana Sewa Sansthan | IEC-B  | 180122/100418    | 18-Jan-2022  | Backward  |        |
| 17     | Bhawana Sewa Sansthan | IEC-A  | 180122/100417    | 18-Jan-2022  | Submitted |        |
| 18     | Bhawana Sewa Sansthan | PHI    | 170122/100416    | 17-Jan-2022  | Forward   |        |
| 19     | Bhawana Sewa Sansthan | PHI    | 170122/100415    | 17-Jan-2022  | Backward  |        |
| 20     | Bhawana Sewa Sansthan | NMPB-D | 100122/100411    | 10-Jan-2022  | Draft     |        |

Showing 11 to 20 of 134 entries

Previous 1 2 3 4 5 ... 14 Next

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details



## 8.10.4.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 11     | Bhawana Sewa Sansthan | NMPB-B | 200122/100431    | 20-Jan-2022  | Submitted |        |
| 12     | Bhawana Sewa Sansthan | NMPB-D |                  |              | mitted    |        |
| 13     | Bhawana Sewa Sansthan | NMPB-A |                  |              | mitted    |        |
| 14     | Bhawana Sewa Sansthan | EMR    | 190122/100420    | 19-Jan-2022  | Submitted |        |
| 15     | Bhawana Sewa Sansthan | EMR    | 190122/100419    | 19-Jan-2022  | Forward   |        |
| 16     | Bhawana Sewa Sansthan | IEC-B  | 180122/100418    | 18-Jan-2022  | Backward  |        |
| 17     | Bhawana Sewa Sansthan | IEC-A  | 180122/100417    | 18-Jan-2022  | Submitted |        |
| 18     | Bhawana Sewa Sansthan | PHI    | 170122/100416    | 17-Jan-2022  | Forward   |        |
| 19     | Bhawana Sewa Sansthan | PHI    | 170122/100415    | 17-Jan-2022  | Backward  |        |
| 20     | Bhawana Sewa Sansthan | NMPB-D | 100122/100411    | 10-Jan-2022  | Draft     |        |

Showing 11 to 20 of 134 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[14](#)
[Next](#)

Figure 8-142

Click to view & download application

**Conservations**

[Download Pdf](#)

**ORGANIZATION DETAILS**

|                          |                                |                   |  |
|--------------------------|--------------------------------|-------------------|--|
| Name Of The Organization | Bhawana Sewa Sansthan          | Address           | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address            | praful.jansari@silvertouch.com | Contact No.       | 9090909090   |
| Registration Number      | 925/2003-04                    | Registration Date | 09-01-2004   |
| Year Of Establishment    | 09-12-2021                     | Organization Type | Non-Profit Non-Govt. Organisations                                 |
| PAN Number               | AAAAH3629P                     | TAN Number        | ryt  |

Figure 8-143

- Click [Download Pdf](#) to download application in PDF



## 8.10.5 Marketing & Trade

### 8.10.5.1 Details of the Organization

**DETAILS OF THE ORGANIZATION**

Name of the organization\*  
Bhawana Sewa Sansthan

State\*  
GUJARAT

Organization Type\*  
Non-Profit Non-Govt. Organisations

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email address\*  
prafuljansari@silvertouch.com

Contact No.\*  
9090909090

Registration Number\*  
925/2003-04

Registration Date\*  
09-01-2004

Year of establishment\*  
Select Year of establishment

PAN No.\*  
AAAAH3629P

NGO Darpan Id\*  
UP\_2017\_0116059

TAN / TIN No.\*

Click to submit form details

Click to save form details and submit later

Save Draft Save & Next

Figure 8-144

#### Enter following details:

- Name of the organization will be displayed automatically
- State will be displayed automatically
- Organization Type will be displayed automatically
- Address will be displayed automatically
- Email Address will be displayed automatically
- Contact No will be displayed automatically
- Registration Number: Enter registration number
- Registration Date will be displayed automatically
- Year Of Establishment: Select year of establishment from dropdown
- Organization Type: Select organization type form dropdown
- NGO Darpan ID will be displayed automatically
- PAN Number will be displayed automatically
- TAN/TIN Number: Enter TAN/TIN number
- Click **Save Draft** to save organization details and submit later
- Click **Save & Next** to save organization details and move to next form



## 8.10.5.2 Project Details

**PROJECT DETAILS**
▼

**Project Title\***

**Project Category\***

**Project Duration\***

**Specific Area of Project\***

**Project Summary\***

**Keywords\***

**Deliverable / Outcomes\***

**DETAILS OF EXECUTIVE AUTHORITY OF APPLICANT ORGANIZATION**

| 1. Name*<br>2. Designation*<br>3. State* | 1. District*<br>2. Address*<br>3. Pin Code*   | 1. Telephone / Mobile*<br>2. Email Address*     | + |
|--|---|---|---|
| <input type="text" value="Name"/>        | <input type="text" value="Select an Option"/> | <input type="text" value="Telephone / Mobile"/> |   |
| <input type="text" value="Select"/>      | <input type="text" value="Address"/>          | <input type="text" value="Email Address"/>      |   |
| <input type="text" value="Select"/>      | <input type="text" value="Pin Code"/>         |   |   |

Figure 8-145

**INVESTIGATOR DETAILS**

| 1. Name*<br>2. DOB*               | 1. Date of Superannuation*<br>2. Designation*       | 1. Gender*<br>2. Expertise / Area of Interest*            | + |
|-----------------------------------|---|---|---|
| <input type="text" value="Name"/> | <input type="text" value="Date of Superannuation"/> | <input type="text" value="Select"/>                       |   |
| <input type="text" value="DOB"/>  | <input type="text" value="Select"/>                 | <input type="text" value="Expertise / Area of Interest"/> |   |

**NAME OF INSTITUTE AND ORGANIZATION**

| 1. Name*<br>2. Address*              | 1. Telephone*<br>2. Fax No*            | 1. Mobile No.*<br>2. No. of Ongoing Project*        | + |
|--------------------------------------|--|---|---|
| <input type="text" value="Name"/>    | <input type="text" value="Telephone"/> | <input type="text" value="Mobile No."/>             |   |
| <input type="text" value="Address"/> | <input type="text" value="Fax No"/>    | <input type="text" value="No. of Ongoing Project"/> |   |

**TECHNICAL DETAILS**

| Origin of the proposal*                             | Rationale of the Study supported by Cited*                             | Hypothesis*                             | Key Questions*                             | + |
|---|--|---|--|---|
| <input type="text" value="Origin of the proposal"/> | <input type="text" value="Rationale of the Study supported by Cited"/> | <input type="text" value="Hypothesis"/> | <input type="text" value="Key Questions"/> |   |



Figure 8-146

| CURRENT STATE & DEVELOPMENT IN THE SUBJECT  |  |  |  |   |
|---|--|--|--|---|
| 1. Subject*<br>2. National Status*<br>3. International Status*<br>4. Relevant & Expected Outcome of the proposed study*<br>5. Subject*<br>6. Relevance* | 1. Expected Outcome*<br>2. Potential Outcome result is expected*<br>3. Preliminary Work done so far*<br>4. Specific Objective*<br>5. Subject*<br>6. Achievement of Objectives* | 1. Verifiable Indicators of progress*<br>2. Work Plan*<br>3. Specific Aims*<br>4. Work Plan/Timelines*<br>5. Connectivity of the participating investigators and institutions*<br>6. Alternative Strategies* | 1. Reason*<br>2. Time frames*<br>3. Period of Study*<br>4. Achievable targets* | + |
| <input type="text" value="Subject"/>  | <input type="text" value="Expected Outcome"/>  | <input type="text" value="Verifiable Indicators of progre"/>   | <input type="text" value="Reason"/>  |   |
| <input type="text" value="National Status"/>  | <input type="text" value="Potential Outcome result is e:"/>  | <input type="text" value="Work Plan"/>   | <input type="text" value="Time frames"/>                                       |   |
| <input type="text" value="International Status"/>   | <input type="text" value="Preliminary Work done so far"/>  | <input type="text" value="Specific Aims"/>   | <input type="text" value="Period of Study"/>                                   |   |
| <input type="text" value="Relevant &amp; Expected Outcor"/>   | <input type="text" value="Specific Objective"/>  | <input type="text" value="Work Plan/Timelines"/>   | <input type="text" value="Achievable targets"/>                                |   |
| <input type="text" value="Subject"/>  | <input type="text" value="Subject"/>   | <input type="text" value="Connectivity of the participat"/>  |  |   |
| <input type="text" value="Relevance"/>  | <input type="text" value="Achievement of Objectives"/>   | <input type="text" value="Alternative Strategies"/>  |  |   |

Figure 8-147



**BUDGET PARTICULARS**

|   |  |  |  |   |
|---|--|--|--|---|
| Budget Particulars*                             |  |  |  | + |
| <input type="text" value="Budget Particulars"/> |  |  |  |   |

**NON RECURRING**

|                                   |                                   |   |  |   |
|-----------------------------------|-----------------------------------|---|--|---|
| Item*                             | Year*                             | Total Cost*                             | Justification*                             | + |
| <input type="text" value="Item"/> | <input type="text" value="Year"/> | <input type="text" value="Total Cost"/> | <input type="text" value="Justification"/> |   |

**RECURRING**

|  |  |   |  |   |
|--|--|---|--|---|
| 1. Manpower*<br>2. Position*   | 1. Number*<br>2. Year*   | 1. Consolidated Emolument (Rs.)*                    |  | + |
| <input type="text" value="Manpower"/><br><input type="text" value="Position"/> | <input type="text" value="Number"/><br><input type="text" value="Year"/> | <input type="text" value="Consolidated Emolument"/> |  |   |

**TRAVEL**

|                                   |   |  |   |
|-----------------------------------|---|--|---|
| Item*                             | Total Cost*                             | Justification*                             | + |
| <input type="text" value="Item"/> | <input type="text" value="Total Cost"/> | <input type="text" value="Justification"/> |   |

**CONTINGENCY**

|                                   |                                   |   |  |   |
|-----------------------------------|-----------------------------------|---|--|---|
| year*                             | Item*                             | Total Cost*                             | Justification*                             | + |
| <input type="text" value="year"/> | <input type="text" value="Item"/> | <input type="text" value="Total Cost"/> | <input type="text" value="Justification"/> |   |

**OTHERS**

|   |  |  |   |
|---|--|--|---|
| 1. Year*<br>2. Item*<br>3. Total Cost*  | 1. Justification*<br>2. Total*<br>3. Existing Facility*  | 1. Manpower*<br>2. Infrastructure*<br>3. Other Resources*  | + |
| <input type="text" value="Year"/><br><input type="text" value="Item"/><br><input type="text" value="Total Cost"/> | <input type="text" value="Justification"/><br><input type="text" value="Total"/><br><input type="text" value="Existing Facility"/> | <input type="text" value="Manpower"/><br><input type="text" value="Infrastructure"/><br><input type="text" value="Other Resources"/> |   |

**Navigation Buttons:**





- (Red box)
- (Red box)
- (Red box)
- (Red box)
- (Red box)
- (Red box)

Figure 8-148













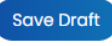
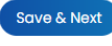
**Enter following details:**

- Project Title: Enter project title
- Project Category: Select project category
- Project Duration: Enter project duration
- Specific Area of Project: Select specific area of project
- Project Summary: Enter project summary
- Keywords: Enter keywords
- Deliverable / Outcomes: Enter deliverable / outcomes
- Name: Enter name
- Designation: Enter designation
- State: Select state from dropdown
- District: Select district from dropdown
- Address: Enter address
- Pin Code: Enter pin code
- Telephone / Mobile: Enter telephone / mobile
- Email Address: Enter email address
- click  to add more details of executive authority of applicant organization
- Name: Enter name
- DOB: Select DOB from calendar
- Date of Superannuation: Select date of superannuation
- 2. Designation: Enter designation
- Gender: Select gender from dropdown
- Expertise / Area of Interest: Enter expertise / area of interest:
- click  to add more investigator details
- Name: Enter name
- Address: Enter address
- Telephone: enter telephone
- Fax No: Enter fax number
- Mobile No: Enter mobile number
- No. of Ongoing Project: Enter number of ongoing project
- click  to add more name of institute and organization
- Origin of the proposal: Enter origin of the proposal
- Rationale of the Study supported by Cited: Enter rationale of the study supported by cited
- Hypothesis: Enter hypothesis
- Key Questions: Enter key questions
- click  to add more technical details
- Subject: Enter subject
- National Status: Enter national status
- International Status: Enter international status
- Relevant & Expected Outcome of the proposed study: Enter relevant & expected outcome of the proposed study



- Subject: Enter subject
- Relevance: Enter relevance
- Expected Outcome: Enter expected outcome \*
- Potential Outcome result is expected: Enter potential outcome result is expected
- Preliminary Work done so far: Enter preliminary Work done so far
- Specific Objective: Enter specific objective
- Subject: Enter subject
- Achievement of Objectives: Enter achievement of objectives
- Verifiable Indicators of progress: Enter verifiable indicators of progress:
- Work Plan: Enter work plan
- Specific Aims: Enter specific aims
- Work Plan/Timelines: Enter work plan/timelines
- Connectivity of the participating investigators and institutions: Enter connectivity of the participating investigators and institutions: Enter
- Alternative Strategies: Enter alternative strategies
- Reason: Enter reason
- Time frames: Enter time frames
- Period of Study: Enter period of study
- Achievable Targets: Enter achievable targets
- Click  to add more current state & development in the subject
- Enter budget particulars
- Click  to add more budget particulars
- Item: Enter item
- Year: Enter year
- Total Cost: Enter total cost
- Justification: Enter justification
- Click  to add more non-recurring details
- Manpower: Enter manpower
- Position: Enter manpower
- Number: Enter number
- Year: Enter year
- Consolidated Emolument (Rs.): Enter consolidated emolument (Rs.)
- Click  to add more recurring details
- Item: Enter item
- Total Cost: Enter total cost
- Justification: Enter justification
- Click  to add more travel details
- year: Enter year
- Item: enter item
- Total Cost: Enter total cost
- Justification: Enter justification



- Click  to add more contingency
- Year: Enter year
- Item: Enter item
- Total Cost: Enter total cost
- Justification: Enter justification
- Total: Enter total
- Existing Facility: Enter existing facility
- Manpower: Enter Manpower
- Infrastructure: Enter infrastructure
- Other Resources: Enter other resources
- Click  to add more others detail
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form

### 8.10.5.3 Attachments

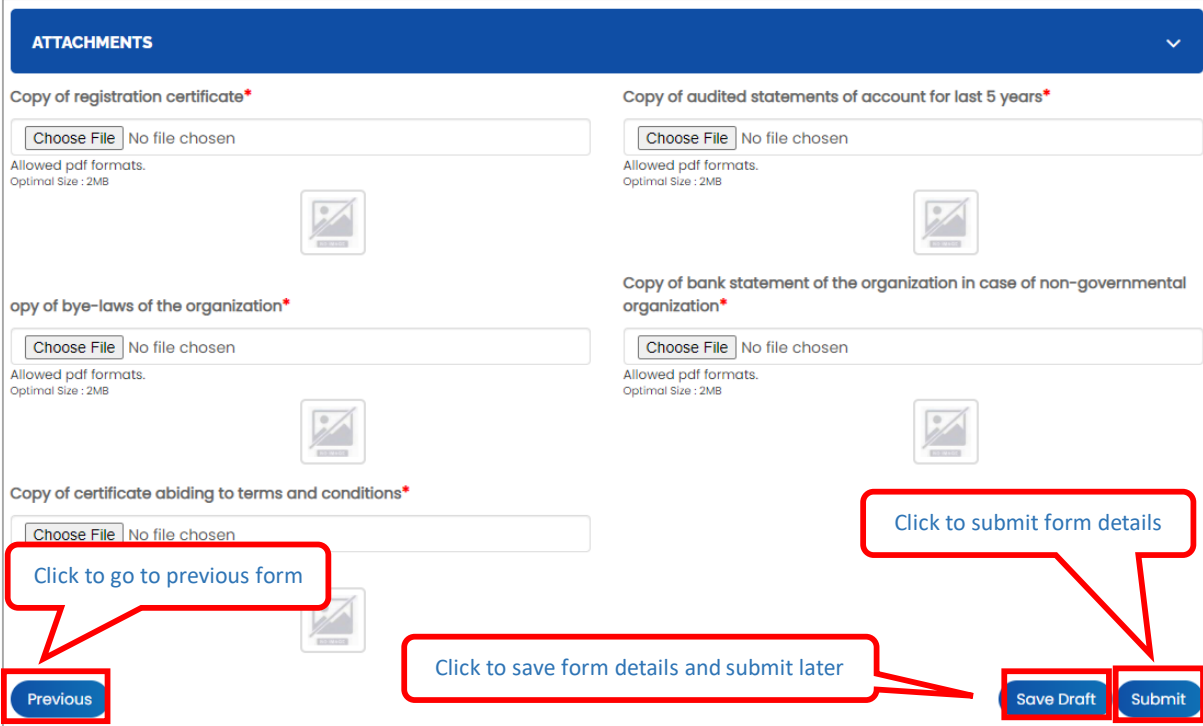
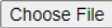
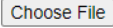
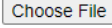
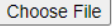


Figure 8-149

#### Enter following details:

- Copy of registration certificate: Click  to upload file
- Copy of audited statements of account for last 5 years: Click  to upload file
- Copy of bye-laws of the organization: Click  to upload file
- Copy of bank statement of the organization in case of non-governmental organization: Click  to upload file



# आयुष मंत्रालय Ministry of Ayush

- Copy of certificate abiding to terms and conditions: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details



Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **[Name]**  
 Your application NO 040122100396 have been submitted successfully for Marketing & Trade On Ayush.  
 Kindly quote your application NO. 030122/100374 in all future correspondence and keep checking status of your application on your dashboard.  
 Thank you.  
 Ministry of Ayush,  
 Government of India

Figure 8-150

On successful submission of form following message will be displayed:

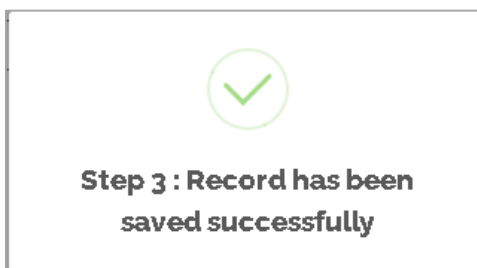


Figure 8-151

### 8.10.5.4 View Application

Marketing & trade will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | NMPB-E       | 050122/100404    | 05-Jan-2022  | Draft     |        |
| 2      | Bhawana Sewa Sansthan | NMPB-D       | 050122/100403    |              |           |        |
| 3      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100402    |              |           |        |
| 4      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100401    | 05-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100400    | 05-          |           |        |
| 6      | Bhawana Sewa Sansthan | NMPB-A       | 040122/100397    | 04-          |           |        |
| 7      | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 040122/100396    | 04-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 040122/100395    | 04-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | PHI          | 040122/100394    | 04-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | PHI          | 040122/100393    | 04-Jan-2022  | Draft     |        |



Showing 1 to 10 of 141 entries

Previous 1 2 3 4 5 ... 15 Next

Figure 8-152

- Sr. No.
- Organization Name
















- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click  (details) to view application details
- Click  (edit) to edit application details

### 8.10.5.5 Download application


**Applications**

Show  entries Search:

| Sr No. | Organization Name | Scheme | Reference Number | Created Date | Status        | Action  |
|--------|-------------------|--------|------------------|--------------|---------------|---|
| 131    | test              | NMPB-A | 181021/100061    | 18-Oct-2021  | Clarification |    |
| 132    | test              | NMPB-C | 181021/100059    | 18-Oct-2021  | Submitted     |    |
| 133    | test              | NMPB-B | 181021/100058    | 18-Oct-2021  | Submitted     |    |
| 134    | test              | NMPB-A | 181021/100056    | 18-Oct-2021  | Draft         |     |
| 135    | test              | NMPB-A | 181021/100054    | 18-Oct-2021  | Submitted     |   |
| 136    | test              | NMPB-F | 141021/100053    | 14-Oct-2021  | Submitted     |    |
| 137    | test              | NMPB-E | 141021/100052    | 14-Oct-2021  | Submitted     |    |
| 138    | test              | NMPB-D | 141021/100051    | 14-Oct-2021  | Submitted     |    |
| 139    | test              | NMPB-C | 141021/100049    | 14-Oct-2021  | Submitted     |    |
| 140    | test              | NMPB-B | 141021/100048    | 14-Oct-2021  | Submitted     |    |

Showing 131 to 140 of 160 entries Previous 1 ... 12 13 14 15 16 Next

Figure 8-153

Click  to view & download application



### Marketing & Trade

[Download Pdf](#)

#### DETAILS OF THE ORGANIZATION

|                          |                               |                   |            |
|--------------------------|-------------------------------|-------------------|------------|
| Name of the organization | test                          | State             | BIHAR      |
| Organization Type        | Private Organisations         | Address           | test       |
| Email address            | prafuljansari@silvertouch.com | Contact No.       | 9090909090 |
| Registration Number      | test                          | Registration Date | 06-10-2021 |
| Year of establishment    | 1993                          | PAN No.           | test       |
| TAN / TIN No.            | test                          |                   |            |

Figure 8-154

- Click [Download Pdf](#) to download application in PDF

## 8.10.6 Herbal Garden

### 8.10.6.1 Details of the Organization

#### DETAILS OF THE ORGANIZATION

|                           |                               |                    |  |
|---------------------------|-------------------------------|--------------------|--|
| Name of the organization* | Bhawana Sewa Sansthan         | Address*           | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address*            | prafuljansari@silvertouch.com | Contact No.*       | 9090909090   |
| Registration Number*      | 925/2003-04                   | Registration Date* | 09-01-2004   |
| Date of establishment*    |                               | PAN Number*        | AAAAH3629P   |
| TAN Number                |                               | Organization Type* | Non-Profit Non-Govt. Organizations                                 |
| Darpan ID*                | UP_2017_0116059               |                    |  |

[Click to submit form details](#)

[Click to save form details and submit later](#)

[Save Draft](#) [Save & Next](#)

Figure 8-155



Enter following details:

- Name of the Organization/company/ Unit etc will be displayed automatically
- Address will be displayed automatically
- Email will be displayed automatically
- Contact No will be displayed automatically
- Registration Number (if required): Enter registration number
- Registration Date (if required) will be displayed automatically
- Date of Establishment: Select date of establishment from calendar
- Darpan ID: will be displayed automatically
- PAN Number will be displayed automatically
- TAN Number: Enter TAN number
- Organization Type will be displayed automatically
- Darpan ID: Enter Darpan ID
- Click **Save Draft** to save details of organization and submit later
- Click **Save & Next** to save details of organization and move to next form

8.10.6.2 Project Details

| PROJECT DETAILS   |   |
|---|---|
| Project title*  | Type of Herbal Garden*  |
| <input type="text"/>  | <input type="text" value="Select Type of Herbal Garden"/>   |
| Brief description of the project*                                 | Project Area*   |
| <input type="text"/>  | <input type="text"/>  |
| Objectives*   | Project coverage in geographical spread, demography and socio – economic profile of the area (wherever required)* |
| <input type="text"/>  | <input type="text"/>  |
| <b>WORK PLAN (YEAR-WISE)</b>                                      |   |
| Year*   | Work Plan* <span style="float: right;">+</span>   |
| <input type="text" value="Select"/>                               | <input type="text" value="Work Plan"/>  |
| Likely impact on the adjoining area and society*                  | Existing Strategy/Sustainability*   |
| <input type="text"/>  | <input type="text"/>  |
| Suggested parameters for monitoring during and after the project* | No. of species of Medicinal Plants proposed for Herbal Garden*  |
| <input type="text"/>  | <input type="text"/>  |

Figure 8-156





|   |  |   |                      |                      |                                  |
|---|--|---|----------------------|----------------------|----------------------------------|
| Name of species of Medicinal Plants proposed for Herbal Garden* |  | Problem Identification*   |                      |                      |                                  |
| <input type="text"/>  |  | <input type="text"/>  |                      |                      |                                  |
| Suggested Solutions*  |  | Alternatives along with anticipated physical and financial benefits*  |                      |                      |                                  |
| <input type="text"/>  |  | <input type="text"/>  |                      |                      |                                  |
| Outcomes both in terms of products and process*                 |  | Sustainability Mechanism*   |                      |                      |                                  |
| <input type="text"/>  |  | <input type="text"/>  |                      |                      |                                  |
| Project Period (Years)*   |  | Total Amount in grant asked for*  |                      |                      |                                  |
| <input type="text"/>  |  | <input type="text"/>  |                      |                      |                                  |
| <b>INFRASTRUCTURE DETAILS</b>                                   |  |   |                      |                      |                                  |
| Infrastructure Details*   | Land details (Location, Extent, Ownership, Area etc.)* | Agri-accessories*   | Manpower*            | Experience*          | <input type="button" value="+"/> |
| <input type="text"/>  | <input type="text"/>                                   | <input type="text"/>  | <input type="text"/> | <input type="text"/> |                                  |
| Physical targets and financial outlays*                         |  | Outcome/ Benefits from the project (both tangible and intangible)*  |                      |                      |                                  |
| <input type="text"/>  |  | <input type="text"/>  |                      |                      |                                  |
| Internal monitoring and evaluation mechanism*                   |  | Summary of similar work particularly in medicinal plants sector undertaken by the organization /PI in the last 3 years* |                      |                      |                                  |
| <input type="text"/>  |  | <input type="text"/>  |                      |                      |                                  |

Figure 8-157



Other sources of financial assistance received by the applicant/organization if any so, furnish details\*

**DETAILS OF FINANCIAL ASSISTANCE ALREADY RECEIVED FROM THE BOARD, IF ANY MAY BE GIVEN IN THE FOLLOWING PRO-FORMA**

| Year*    | Amount of grant* | Purpose in brief* | Total expenses incurred* | Amount of grant utilized* | Remark* |  |
|----------|------------------|-------------------|--------------------------|---------------------------|---------|--|
| Select ▾ | Amount of grant  | Purpose in brief  | Total expenses inc       | Amount of grant i         | Remark  |  |

**DETAILS OF INVESTIGATOR/CO-INVESTIGATOR**

| 1. Name*                   | 1. Gender*                         | 1. Email address*            | 1. Copy of bio-data*   | 1. Copy of Detailed maintenance mechanism beyond the duration of project and Sustainability Mechanism for Herbal Garden* |  |
|----------------------------|------------------------------------|------------------------------|--|--|--|
| 2. DOB*                    | 2. Area of research interest*      | 2. Contact no.*              | 2. Copy of scanned copy of signature*  | 2. Copy of Costing pattern to be provided in the form of schedule of rates as applicable*                                |  |
| 3. Date of superannuation* | 3. Name of institute/organization* | 3. No. of research going on* | 3. Copy of Proof of land ownership/leasehold and market mechanism*                       | 3. Copy of Supporting documents including map (where applicable) must be attached *                                      |  |
| 4. Designation*            | 4. address*                        |                              |  |  |  |
| Name                       | Select ▾                           | Email adr                    | Choose File No file chosen<br><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small> | Choose File No file chosen<br><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small>                                 |  |

Figure 8-158



Name  Select  Email address   No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

DOB  Area of research inter  Contact number   No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

Date of superann  Name of institute/org  No. of res   No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

Designation  address   No file chosen  
Allowed pdf formats.  
Optimal Size : 2MB

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SMPB recommendation letter\*

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

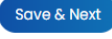
Click to save form details and submit later

Click to submit form details

Figure 8-159

- Project title: Enter project title
- Type of Herbal Garden: Select type of herbal garden from dropdown
- Brief description of the project: Enter brief description of the project
- Project Area: Enter project area
- Objectives: Enter objectives:
- Project coverage in geographical spread, demography and socio – economic profile of the area (wherever required): Enter project coverage in geographical spread, demography and socio – economic profile of the area (wherever required)
- Year: Enter year
- Work Plan: Enter work plan
- Likely impact on the adjoining area and society: Enter likely impact on the adjoining area and society
- Existing Strategy/Sustainability: Enter Existing Strategy/Sustainability
- Suggested parameters for monitoring during and after the project: Enter suggested parameters for monitoring during and after the project
- No. of species of Medicinal Plants proposed for Herbal Garden: Enter no. of species of Medicinal Plants proposed for Herbal Garden
- Name of species of Medicinal Plants proposed for Herbal Garden: Enter name of species of Medicinal Plants proposed for herbal garden\*
- Problem Identification: Enter problem identification
- Suggested Solutions: Enter suggested solutions



- Alternatives along with anticipated physical and financial benefits: Enter alternatives along with anticipated physical and financial benefits
- Outcomes both in terms of products and process: Enter outcomes both in terms of products and process
- Sustainability Mechanism: Enter sustainability mechanism
- Project Period (Years): Enter project period
- Total Amount in grant asked for: Enter total amount in grant asked for
- Enter infrastructure details
- Click  to add more infrastructure details
- Physical targets and financial outlays: Enter physical targets and financial outlays
- Outcome/ Benefits from the project (both tangible and intangible): Enter outcome/ benefits from the project (both tangible and intangible)
- Internal monitoring and evaluation mechanism: Enter internal monitoring and evaluation mechanism
- Summary of similar work particularly in medicinal plants sector undertaken by the organization /PI in the last 3 years: Enter summary of similar work particularly in medicinal plants sector undertaken by the organization /PI in the last 3 years
- Other sources of financial assistance received by the applicant/organization if any so, furnish details: Enter other sources of financial assistance received by the applicant/organization if any so, furnish details
- Enter details of financial assistance already received from the board, if any may be given in the following pro-forma
- Click  to add more details of financial assistance already received from the board, if any may be given in the following pro-forma
- Enter details of investigator/co-investigator
- Click  to add more details of investigator/co-investigator
- Click [Download SMPB sample recommendation letter](#) to download SMPB sample, Frontend user needs to download, sign and upload it before processing further.
- SMPB recommendation letter:
  - Click  to upload file
  - Click  to go to previous form
  - Click  to save project details and submit later
  - Click  to project details and move to next form



## 8.10.6.3 Attachments

**ATTACHMENTS**
▼

**Copy of registration certificate\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**COPY OF AUDITED STATEMENTS OF ACCOUNT FOR LAST 5 YEARS**

| Year*    | Attachment*  | + |
|----------|--|---|
| Select ▼ | <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <span>Choose File</span> No file chosen         </div> <p><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small></p> <div style="text-align: center;"> </div> | + |

**Copy of bye-laws of the organization\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of bank statement of the organization in case of non-governmental organization\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of certificate abiding to terms and conditions\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**In case annual report of the institution is not published, a note on activities during last year in brief may be enclosed\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Proof of land ownership/leasehold and market mechanism\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Detailed maintenance mechanism beyond the duration of project and Sustainability Mechanism for Herbal Garden\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Costing pattern to be provided in the form of schedule of rates as applicable\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of Supporting documents including map (where applicable) must be attached\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of SMPB recommendation\***

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

[Click to go to previous form](#)

[Click to submit form details](#)

[Previous](#)

[Click to save form details and submit later](#)

[Save Draft](#)

[Submit](#)

Figure 8-160



### Enter following details:

- Copy Of Registration Certificate: Click  to upload file
- Year: Select year from dropdown
- Attachments: Click  to upload file
- Click  to add more copy of audited statements of account for last 5 years
- Copy Of Bye-laws Of The Organization: Click  to upload file
- Copy Of Bank Statement Of The Organization In Case Of Non-governmental Organization: Click  to upload file
- Copy Of Certificate Abiding To Terms And Conditions: Click  to upload file
- In Case Annual Report Of The Institution Is Not Published, A Note On Activities During Last Year In Brief May Be Enclosed: Click  to upload file
- Copy of Proof of land ownership/leasehold and market mechanism: Click  to upload file
- Copy of Detailed maintenance mechanism beyond the duration of project and Sustainability Mechanism for Herbal Garden: Click  to upload file
- Copy of Costing pattern to be provided in the form of schedule of rates as applicable: Click  to upload file
- Copy of Supporting documents including map (where applicable) must be attached: Click  to upload file
- Copy of SMPB recommendation: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear Pranav Rana  
Your application NO. 030122/100374 has been submitted successfully for Herbal garden On Ayush.

Kindly quote your application NO. 030122/100374 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-161

On successful submission of form following message will be displayed:

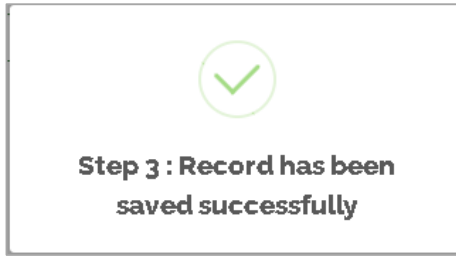


















Figure 8-162

#### 8.10.6.4 View Applications

Frontend user can search application by entering search terms in search textbox



Herbal garden details will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action  |
|--------|-----------------------|--------------|------------------|--------------|-----------|---|
| 1      | Bhawana Sewa Sansthan | NMPB-C       | 050122/100405    | 05-Jan-2022  | Draft     |     |
| 2      | Bhawana Sewa Sansthan | NMPB-E       | 050122/100404    | 05-Jan-2022  | Draft     |   |
| 3      | Bhawana Sewa Sansthan | NMPB-D       | 050122/100403    | 05-Jan-2022  | Draft     |   |
| 4      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100402    | 05-Jan-2022  | Draft     |   |
| 5      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100401    | 05-Jan-2022  | Draft     |   |
| 6      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100400    | 05-Jan-2022  | Draft     |   |
| 7      | Bhawana Sewa Sansthan | NMPB-A       | 040122/100397    | 04-Jan-2022  | Submitted |    |
| 8      | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 040122/100396    | 04-Jan-2022  | Submitted |    |
| 9      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 040122/100395    | 04-Jan-2022  | Submitted |    |
| 10     | Bhawana Sewa Sansthan | PHI          | 040122/100394    | 04-Jan-2022  | Submitted |    |

Showing 1 to 10 of 142 entries

Previous 1 2 3 4 5 ... 15 Next

Figure 8-163

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click  (details) to view application details
- Click  (edit) to edit application details



8.10.6.5 Download application

### Applications

Show 10 entries Search:

| Sr No. | Organization Name | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-------------------|--------------|------------------|--------------|-----------|--------|
| 111    | test              | CSSS-MVT(AH) | 201021/100088    | 20-Oct-2021  | Draft     |        |
| 112    | test              | CSSS-MVT(SD) | 201021/100085    | 20-Oct-2021  | Rejected  |        |
| 113    | test              | NMPB-C       | 201021/100084    | 20-Oct-2021  | Draft     |        |
| 114    | test              | NMPB-F       | 201021/100083    | 20-Oct-2021  | Submitted |        |
| 115    | test              | NMPB-D       | 201021/100082    | 20-Oct-2021  | Forward   |        |
| 116    | test              | NMPB-C       | 201021/100081    | 20-Oct-2021  | Submitted |        |
| 117    | test              | NMPB-E       | 201021/100080    | 20-Oct-2021  | Rejected  |        |
| 118    | test              | NMPB-A       | 201021/100079    | 20-Oct-2021  | Submitted |        |
| 119    | test              | NMPB-B       | 201021/100076    | 20-Oct-2021  | Draft     |        |
| 120    | test              | NMPB-B       | 201021/100075    | 20-Oct-2021  | Submitted |        |

Showing 111 to 120 of 160 entries

Previous 1 11 12 13 16 Next

Figure 8-164

Click to view & download application

### Herbal Garden

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#### DETAILS OF THE ORGANIZATION

|                          |                                |                   |                     |
|--------------------------|--------------------------------|-------------------|---------------------|
| Name of the organization | test                           | Address           | test                |
| Email Address            | praful.jansari@silvertouch.com | Contact No.       | 2147483647          |
| Registration Number      | FGH                            | Registration Date |                     |
| Date of establishment    | 27-09-2021                     | PAN Number        |                     |
| TAN Number               |                                | Organization Type | Govt. Organisations |

Next

Figure 8-165

- Click [Download Pdf](#) to download application in PDF





### 8.10.7 Other Promotional Activities (QPM/Nursery/Germ Plasm)

#### 8.10.7.1 Organization Details

| ORGANIZATION DETAILS               |  |
|------------------------------------|--|
| Name Of The Organization*          | Address*   |
| Bhawana Sewa Sansthan              | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address*                     | Contact No.*   |
| praful.jansari@silvertouch.com     | 9090909090   |
| Registration Number*               | Registration Date*   |
| 925/2003-04                        | 09-01-2004   |
| Date Of Establishment*             | Darpan ID*   |
|                                    | UP_2017_0116059  |
| PAN Number*                        | TAN Number*  |
| AAAAH3629P                         |  |
| Organization Type*                 |  |
| Non-Profit Non-Govt. Organisations |  |

Click to submit form details

Click to save form details and submit later

Save Draft Save & Next

Figure 8-166

#### Enter following details:

- Name of the Organization/company/ Unit etc will be displayed automatically
- Address will be displayed automatically
- Email will be displayed automatically
- Contact No will be displayed automatically
- Registration Number: Enter registration number
- Registration Date will be displayed automatically
- Date of Establishment: Select date of establishment from calendar
- Darpan ID: will be displayed automatically
- PAN Number will be displayed automatically
- TAN Number: Enter TAN number
- Organization Type will be displayed automatically
- Click **Save Draft** to save details of organization and submit later
- Click **Save & Next** to save details of organization and move to next form



8.10.7.2 Project Details:

| PROJECT DETAILS  |   |   |   |
|--|---|---|---|
| <b>PROJECT TITLE</b>   |   |   |   |
| 1. Project Title*  | 1. District*                                | 1. Email Id*  | + |
| 2. Project Category*   | 2. City*                                    | 2. Mobile No*   |   |
| 3. Name of the Organization*   | 3. Pin Code*                                | 3. Status of the Organization*                                  |   |
| 4. State*  | 4. Address*                                 |   |   |
| <input type="text" value="Project Title"/>   | <input type="text" value="AHMADABAD"/>      | <input type="text" value="Email Id"/>                           |   |
| <input type="text" value="Project Category"/>  | <input type="text" value="City"/>           | <input type="text" value="Mobile No"/>                          |   |
| <input type="text" value="Name of the Organization"/>  | <input type="text" value="Pin Code"/>       | <input type="text" value="Non-Profit Non-Govt. Organisations"/> |   |
| <input type="text" value="GUJARAT"/>   | <input type="text" value="Address"/>        |   |   |
| <b>BRIEF INTRODUCTION OF CONCEPT &amp; JUSTIFICATION OF PROJECT</b>  |   |   |   |
| 1. Brief Introduction Of Concept & Justification Of Project: Project Description*                              | 1. Project Period*                          | 2. Proposed Grant Requested From NMPB*                          | + |
| <input type="text" value="Brief Introduction Of Concept &amp; Justification Of Project: Project Description"/> | <input type="text" value="Project Period"/> | <input type="text" value="Proposed Grant Requested From NMPB"/> |   |

Figure 8-167



| DETAILED INFRASTRUCTURE AVAILABLE  |   |  |   |
|--|---|--|---|
| 1. Detailed Infrastructure Available: Land Details*                                  | 1. Agri-Accessories*<br>2. Manpower*  | 1. Experience*<br>2. Physical Targets & Financial Outlays*   | + |
| <input type="text" value="Detailed Infrastructure Available: Land Details"/>         | <input type="text" value="Agri-Accessories"/><br><input type="text" value="Manpower"/>                                | <input type="text" value="Experience"/><br><input type="text" value="Physical Targets &amp; Financial Outlays"/> |   |
| Outcome / Benefits From The Project*   |   | Internal Monitoring & Evaluation Mechanism*  |   |
| <input type="text"/>   |   | <input type="text"/>   |   |
| DETAILS OF FINANCIAL BREAKUP   |   |  |   |
| 1. Details of Financial Breakup: Tentative Proposed Budget*                          | 1. Activities*<br>2. Year*<br>3. Amount*  |  | + |
| <input type="text" value="Details of Financial Breakup: Tentative Proposed Budget"/> | <input type="text" value="Activities"/><br><input type="text" value="Select"/><br><input type="text" value="Amount"/> |  |   |

Figure 8-168



Details Of Financial Assistance Already Received From The Board, If Any May Be Given In The Following Proforma\*

Yes  No

| 1. Name Of The Project*  | 1. Has Utilization Certificate Been Accepted By Board*                          |  |
|--|---|--|
| 2. Details Of Financial Assistance Already Received From The Board, If Any May Be Given In The Following Proforma: Year* | 2. Details / Status*  |  |
| 3. Amount Of Grant*  | 3. Total Expenses Incurred*   |  |
| <input type="text" value="Name Of The Project"/>   | <input type="text" value="Has Utilization Certificate Been Accepted By Board"/> |  |
| <input type="text" value="Select"/>  | <input type="text" value="Details / Status"/>                                   |  |
| <input type="text" value="Amount Of Grant"/>   | <input type="text" value="Total Expenses Incurred"/>                            |  |

Detailed Maintenance Mechanism Beyond The Duration Of Project And Sustainability Mechanism For Herbal Garden\*

**INVESTIGATOR TYPE**

| 1. Investigator Type*                          | 1. Date of Superannuation*                          | 1. Expertise / Area of Research Interest*        | 1. Address*                            | 1. Mobile No.*                              |  |
|--|---|--|--|---|--|
| 2. Investigator Name*                          | 2. Designation*                                     | 2. Name of Institute and University*             | 2. Telephone                           | 2. No. of Ongoing Research Project*         |  |
| 3. DOB*  | 3. Gender*  |  | 3. Fax No.                             |   |  |
| <input type="text" value="Investigator Type"/> | <input type="text" value="Date of Superannuation"/> | <input type="text" value="Expertise / Area of"/> | <input type="text" value="Address"/>   | <input type="text" value="Mobile No."/>     |  |
| <input type="text" value="Investigator Name"/> | <input type="text" value="Designation"/>            | <input type="text" value="Name of Institu"/>     | <input type="text" value="Telephone"/> | <input type="text" value="No. of Ongoing"/> |  |

Figure 8-169



DOB  Select  Name  Fax No.

Technical Details\*

Description Of The Problem\*

Alternative Strategy Possible\*

Objectives of the project\*

Suggested Solutions\*

Project Coverage In Geographical Spread, Demography, And Socio-economic Profile Of The Area With Maps (Wherever Applicable)\*

**WORK PLAN**

| Work Plan: Year *           | Plan *                    | Description *                    |                                  |
|-----------------------------|---------------------------|----------------------------------|----------------------------------|
| Select <input type="text"/> | Plan <input type="text"/> | Description <input type="text"/> | <input type="button" value="+"/> |

Likely Impact On Adjoining Area And Society\*

Exit Strategy / Sustainability\*

Suggested Parameters For Monitoring During And After Proposal\*

**LIST AND NO. OF SPECIES OF MEDICINAL PLANTS PROPOSED FOR QPM/NURSERY/GERM/SEED BANK**

| List And No. Of Species Of Medicinal Plants Proposed For QPM/Nursery/Germ/seed bank: Name Of Species * | No. Of Plants *                    |                                  |
|--|------------------------------------|----------------------------------|
| List And No. Of Species Of Medicinal Plants Proposed For QPM/Nursery/Germ/seed bank: Name Of Sp        | No. Of Plants <input type="text"/> | <input type="button" value="+"/> |

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SMPB recommendation letter\*

No file chosen

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Click to go to previous form

Click to save form details and submit later




Click to submit form details

Figure 8-170



Enter following details:

- Project Title: Enter project title
- Project Category: Enter project category
- Name of the Organization: Enter name of the organization
- State: Select state form dropdown
- District: Select district from dropdown




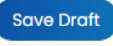
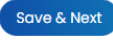


- City: Enter city
- Pin Code: Enter pin code
- Address: Enter address
- Email Id: Enter email ID
- Mobile No: Enter mobile number
- Non-Profit Non-Govt. Organisations: Select non-profit non-Govt. organisations from dropdown
- Brief introduction of concept & justification of project: Enter Brief introduction of concept & justification of project
- Click  to add more details of brief introduction of concept & justification of project: Enter Brief introduction of concept & justification of project
- Detailed infrastructure available: Enter detailed infrastructure available
- Click  to add more details of detailed infrastructure available
- Details of financial breakup: enter details of financial breakup
- Click  to add more details of details of financial breakup
- Details of financial assistance already received from the board, if any may be given in the following proforma: Enter details of financial assistance already received from the board, if any may be given in the following proforma

If frontend user click Yes-  radio button then user needs to enter following details:

- Name Of The Project: Enter name of the project
- Details Of Financial Assistance Already Received From The Board, If Any May Be Given In The Following Proforma: Year: Select year from dropdown
- Amount Of Grant: Enter amount of grant
- Has Utilization Certificate Been Accepted By Board: Enter has utilization certificate been accepted by board
- Details / Status: Enter details/status
- 3. Total Expenses Incurred: Enter total expenses incurred
- Click  to add more details of financial assistance already received from the board, if any may be given in the following proforma
- Detailed Maintenance Mechanism Beyond The Duration Of Project And Sustainability Mechanism For Herbal Garden: Enter detailed maintenance mechanism beyond the duration of project and sustainability mechanism for herbal garden
- Investigator type: Enter investigator type
- Click  to add more details of investigator type
- Technical Details: Enter technical details
- Description Of The Problem: Enter description of the problem
- Alternative Strategy Possible: Enter alternative strategy possible
- Objectives of the project: Enter objectives of the project
- Suggested Solutions: Enter suggested solutions



- Project coverage in geographical spread, demography, and socio-economic profile of the area with maps (wherever applicable): enter project coverage in geographical spread, demography, and socio-economic profile Of the area with maps (wherever applicable)
- Work plan: Enter work plan
- Click  to add more details of work plan
- Likely Impact On Adjoining Area And Society: Enter likely Impact On Adjoining Area And Society
- Exit Strategy / Sustainability: Enter exit strategy / sustainability
- Suggested Parameters For Monitoring During And After Proposal: Enter suggested parameters for monitoring during and after proposal
- List and no. Of species of medicinal plants proposed for QPM/nursery/GERM/seed bank: Enter list and no. of species of medicinal plants proposed for QPM/nursery/GERM/seed bank
- Click  to add more details of list and no. of species of medicinal plants proposed for QPM/nursery/GERM/seed bank
- Click [Download SMPB sample recommendation letter](#) to download SMPB sample, Frontend user needs to download, sign and upload it before processing further.
- SMPB recommendation letter: Click  to upload file
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form



### 8.10.7.3 Attachments

**ATTACHMENTS**

Copy Of Registration Certificate\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**COPY OF AUDITED STATEMENTS OF ACCOUNT FOR LAST 5 YEARS**

| Years* | Attachment*  |   |
|--------|--|---|
| Select | Choose File No file chosen<br>Allowed pdf formats.<br>Optimal Size : 2MB | + |

Copy Of Bye-laws Of The Organization

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy Of Bank Statement Of The Organization In Case Of Non-governmental Organization

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy Of Certificate Abiding To Terms And Conditions

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Copy Of Costing Pattern To Be Provided Of Scheduled Rates As Applicable

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Gis Mapping & Supporting Documents Including Map Wherever Required\*

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to submit form details

Click to save form details and submit later

Previous Save Draft Submit

Figure 8-171

#### Enter following details:

- Copy of registration certificate: Click **Choose File** to upload file
- Year: Select year from dropdown
- Attachment: Click **Choose File** to upload file
- Click **+** to add more copy of audited statements of account for last 5 years
- Copy of bye-laws of the organization: Click **Choose File** to upload file
- Copy of bank statement of the organization in case of non-governmental organization: Click **Choose File** to upload file
- Copy of certificate abiding to terms and conditions: Click **Choose File** to upload file
- Copy Of Costing Pattern To Be Provided Of Scheduled Rates As Applicable: Click **Choose File** to upload file





- GIS Mapping & Supporting Documents Including Map Wherever Required: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **Prakash Singh**  
Your application NO. 040122/100396 has been submitted successfully for IEC & Training On Ayush.

Kindly quote your application NO. 040122/100396 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-172

On successful submission of form following message will be displayed:

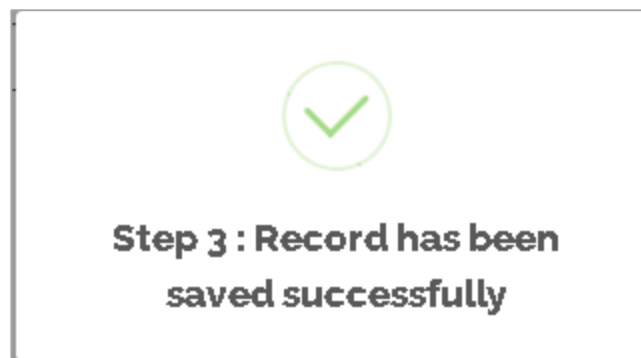




















Figure 8-173



#### 8.10.7.4 View Applications

Frontend user can search application by entering search terms in search textbox



IEC & Training will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action  |
|--------|-----------------------|--------------|------------------|--------------|-----------|---|
| 1      | Bhawana Sewa Sansthan | NMPB-F       | 050122/100406    | 05-Jan-2022  | Draft     |     |
| 2      | Bhawana Sewa Sansthan | NMPB-C       | 050122/100405    | 05-Jan-2022  | Draft     |     |
| 3      | Bhawana Sewa Sansthan | NMPB-E       | 050122/100404    |              |           |     |
| 4      | Bhawana Sewa Sansthan | NMPB-D       | 050122/100403    |              |           |     |
| 5      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100402    | 05-Jan-2022  | Draft     |     |
| 6      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100401    |              |           |     |
| 7      | Bhawana Sewa Sansthan | NMPB-B       | 050122/100400    |              |           |     |
| 8      | Bhawana Sewa Sansthan | NMPB-A       | 040122/100397    | 04-Jan-2022  | Draft     |   |
| 9      | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 040122/100396    | 04-Jan-2022  | Submitted |    |
| 10     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 040122/100395    | 04-Jan-2022  | Submitted |    |

Showing 1 to 10 of 143 entries

Previous 1 2 3 4 5 ... 15 Next

Figure 8-174

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click  (details) to view application details
- Click  (edit) to edit application details



8.10.7.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 11     | Bhawana Sewa Sansthan | IC-D   | 310122/100459    | 31-Jan-2022  | Submitted |        |
| 12     | Bhawana Sewa Sansthan | COE    | 280122/100450    | 28-Jan-2022  | Submitted |        |
| 13     | Bhawana Sewa Sansthan | NMPB-D | 280122/100449    | 28-Jan-2022  | Submitted |        |
| 14     | Bhawana Sewa Sansthan | IEC-B  | 280122/100448    | 28-Jan-2022  | Submitted |        |
| 15     | Bhawana Sewa Sansthan | IC-A   | 270122/100447    | 27-Jan-2022  | Approved  |        |
| 16     | Bhawana Sewa Sansthan | NMPB-F | 270122/100446    | 27-Jan-2022  | Submitted |        |
| 17     | Bhawana Sewa Sansthan | NMPB-C |                  |              | Submitted |        |
| 18     | Bhawana Sewa Sansthan | NMPB-A |                  |              | Submitted |        |
| 19     | Bhawana Sewa Sansthan | NMPB-F | 250122/100443    | 25-Jan-2022  | Forward   |        |
| 20     | Bhawana Sewa Sansthan | NMPB-E | 250122/100442    | 25-Jan-2022  | Rejected  |        |

Showing 11 to 20 of 160 entries

Previous 1 2 3 4 5 ... 16 Next

Figure 8-175

Click to view & download application

**Other Promotional Activities (QPM/Nursery/Germ Plasm)**

[Download Pdf](#)

**ORGANIZATION DETAILS**

|                          |                                |                   |  |
|--------------------------|--------------------------------|-------------------|--|
| Name Of The Organization | Bhawana Sewa Sansthan          | Address           | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email Address            | praful.jansari@silvertouch.com | Contact No.       | 9090909090   |
| Registration Number      | 925/2003-04                    | Registration Date | 09-01-2004   |
| Date Of Establishment    | 31-01-2022                     | PAN Number        | AAAAH3629P   |
| TAN Number               | aaaa                           | Organization Type | Non-Profit Non-Govt. Organisations                                 |

Next

Figure 8-176

- Click [Download Pdf](#) to download application in PDF



### 8.11 Central Sector Scheme of Champion Service Sector Scheme for Medical Value

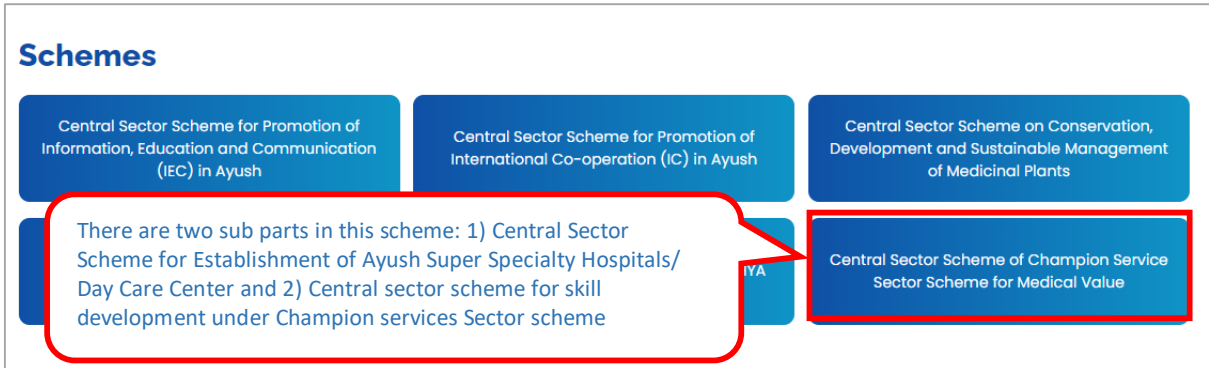


Figure 8-177

Under Central Sector Scheme of Champion Service Sector Scheme for Medical Value, frontend user can apply for following schemes:

- Central Sector Scheme for Establishment of Ayush Super Specialty Hospitals/ Day Care
- Center Central sector scheme for skill development under Champion services Sector scheme

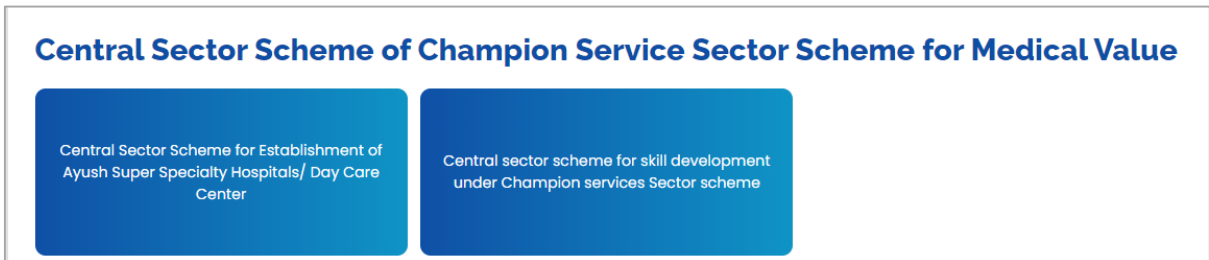


Figure 8-178



8.11.1 Central Sector Scheme for Establishment of Ayush Super Specialty Hospitals/ Day Care Center

8.11.1.1 Details of the Organization

**DETAILS OF THE ORGANIZATION**

Name of the organization\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Email Address\*  
prafuljansari@silvertouch.com

Contact No.\*  
9090909090

Mobile No.\*

**ABSTRACT OF AUDITED ANNUAL ACCOUNTS OF LAST FIVE YEARS**

| Year*  | Financial turnover of the organization.* | Profit / loss with amount.* | Balance sheet*  |   |
|--------|--|-----------------------------|---|---|
| Select | Financial turnover of the organizati     | Profit / loss with amount.  | Choose File No file chosen<br>Allowed pdf,xlsx formats.<br>Optimal Size : 2MB | + |

Registration No.  
925/2003-04

Registration Date\*  
09-01-2004

PAN Number\*  
AAAAH3629P

Darpan ID\*  
UP\_2017\_0116059

TAN Number

Executive summary of the proposal point wise as per Annexure -G\*

Category of hospitals -50 bedded, 10 bedded, Day care.\*

Click to save form details and submit later

Click to submit form details

Save Draft Save & Next

Figure 8-179

Enter following details:

- Name of the Organization will be displayed automatically
- Address will be displayed automatically
- Email Address will be displayed automatically
- Contact No will be displayed automatically
- Mobile No will be displayed automatically
- Year: Select year from dropdown
- Financial turnover of the organization: Enter Financial turnover of the organization
- Profit / loss with amount: Enter profit / loss with amount
- Balance sheet:



- Click  to upload file
- click  to add more details of abstract of audited annual accounts of last five years
- Registration No will be displayed automatically
- Registration Date will be displayed automatically
- PAN Number will be displayed automatically
- Darpan ID will be displayed automatically
- TAN Number: Enter TAN number
- Executive summary of the proposal point wise as per Annexure –G: Enter executive summary of the proposal point wise as per Annexure –G
- Category of hospitals -50 bedded, 10 bedded, Day care: Enter category of hospitals -50 bedded, 10 bedded, day care
- Click  to save details of organization and submit later
- Click  to save details of organization and move to next form

### 8.11.1.2 Project Details

**PROJECT DETAILS**
▼

**Whether Land Is In Possession Or Not\***

**Total Area Of Land Available\***

**Required Area\***

**Details Of The Existing Infrastructure, If Any**

**Rationale For Proposed Location In Terms Of Transportation, Basic Infrastructure Etc\***

**Estimated footfall of patients\***

**International Patients\***

**Domestic Patients\***

**Expected No. Of Employment Generation\***

**Proposed Strategy/Mechanism To Attract International Patients/Tourists/Visa\***

**DETAILS OF TECHNICAL AND OTHER PERSONNEL**

| Personal Name*                             | Designation*                             | Appointment Date*                             | Appointment Letter*   | + |
|--|--|---|---|---|
| <input type="text" value="Personal Name"/> | <input type="text" value="Designation"/> | <input type="text" value="Appointment Date"/> | <input type="button" value="Choose File"/> No file chosen<br><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small> |   |

Figure 8-180



| PAST ACTIVITIES AND ACHIEVEMENTS OF THE ORGANIZATION DURING LAST 5 YEARS                     |                  |  |
|--|------------------|--|
| Achievement Year*  | Achievement*     |  |
| Select   | Achievement      | +  |
| Justifications Why Investor(s) Is/Are Keen To Undertake This Project With Their Vision Etc.* |                  | Any Other Relevant Information*  |
|  |                  |  |
| ANNUAL AUDITED STATEMENT   |                  |  |
| Statement Year*  | Turnover (Rs.)*  | Audited statement*   |
| Select   | Turnover (Rs.)   | Choose File No file chosen<br>Allowed pdf formats.<br>Optimal Size : 2MB<br> |
| INVESTMENT DETAILS ON YEARLY BASIS   |                  |  |
| Investment Year*   | Investment Type* |  |
| Select   | Investment Type  | +  |

Figure 8-181



**DETAILS OF VARIOUS PROJECT COMPONENTS INCLUDING AREA REQUIRED, ESTIMATED CAPACITIES AND COSTS FOR VARIOUS FACILITIES INCLUDING INSTRUMENTS ETC.**

| Component Type*                             | Construction cost*                             | Equipment and machinery cost*                             |                                  |
|---|--|---|----------------------------------|
| <input type="text" value="Component Type"/> | <input type="text" value="Construction cost"/> | <input type="text" value="Equipment and machinery cost"/> | <input type="button" value="+"/> |

Details of proposed business plan\*

**DETAILS OF PROPOSED ENABLING BASIC INFRASTRUCTURE INCLUDING REQUIREMENTS OF BASIC UTILITIES LIKE POWER, WATER, EFFLUENT TREATMENT. PROOF OF POSSESSION OF OTHER INFRASTRUCTURE FOR CONDUCTING.**

| Description*                             | Attachment*   |                                  |
|--|---|----------------------------------|
| <input type="text" value="Description"/> | <input type="text" value="Choose File No file chosen"/><br><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small><br> | <input type="button" value="+"/> |

Summary of estimated cost of each of the eligible components of the component to be provided by the as outlined in the Scheme.\*

Figure 8-182

**Enter following details:**

- Whether Land Is In Possession Or Not: Select Whether Land Is In Possession Or Not from dropdown
- Total Area Of Land Available: Enter total area of land available
- Required Area: Enter required area
- Details Of The Existing Infrastructure, If Any: Enter details Of The Existing Infrastructure, If Any
- Rationale For Proposed Location In Terms Of Transportation, Basic Infrastructure Etc: Enter Rationale For Proposed Location In Terms Of Transportation, Basic Infrastructure Etc
- International Patients: Enter international patients
- Domestic Patients: Enter domestic patients
- Expected No. Of Employment Generation: Enter expected No. of employment generation
- Proposed Strategy/Mechanism To Attract International Patients/Tourists/Visa: Enter proposed strategy/mechanism to attract international patients/tourists/visa
- Personal Name: Enter personal name





- Designation: Enter designation
- Appointment Date: Select appointment date from calendar
- Appointment Letter:
  - Click  to upload file
- Click  to add more details of technical and other personnel
- Achievement Year: Select achievement year from dropdown
- Achievement: Enter achievement
- Click  to add more details of various project components
- Justifications Why Investor(S) Is/Are Keen To Undertake This Project With Their Vision Etc.: Enter justifications Why Investor(S) Is/Are Keen To Undertake This Project With Their Vision Etc.\*
- Any Other Relevant Information: Enter any other relevant information
- Statement Year: Select statement year from dropdown
- Turnover (Rs.): Enter turnover (Rs.)
- Click  to add more details of proposed enabling basic infrastructure
  - Audited statement: Click  to upload file
- Investment Year: Select investment year from dropdown
- Investment Type: Enter investment type
- Component Type: Enter component type
- Construction cost: Enter construction cost
- Equipment and machinery cost: Enter equipment and machinery cost
- Details of proposed business plan: Enter details of proposed business plan
- Description: Enter description
  - Attachment: Click  to upload file
- Summary of estimated cost of each of the eligible components of the project for seeking Interest Subsidy Component to be provided by the Government through identified institutions as outlined in the Scheme.: Enter summary of estimated cost of each of the eligible components of the project for seeking Interest Subsidy Component to be provided by the Government through identified institutions as outlined in the Scheme
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form



### 8.11.1.3 Attachments

Figure 8-183

#### Enter following details:

- Attested copy Registration certificate under societies registration act/trust/Companies etc.: Click  to upload file
- Attested copy of bye laws: Click  to upload file
- Copy Of Bond On Rs 100/- Stamp Paper Duly Notarized To Abide By All Terms And Conditions Of The Guidelines Of The Scheme Sanction Letter, Gfr, Component Wise Approved Project Cost And Year Wise Deliverables To Be Achieved Under The Project Cost And Year -Wise Deliverables To Be Achieved Under The Project. The Validity Of The Bond Should Not Be Less Than 15 Years.(Annexure-d): Click  to upload file
- Copy Of Proof Of Experience In Running Health Care Unit/Hospital: Click  to upload file



- Any Assistance/GIA taken from the Government of India/Foreign Government, along with the details of the project(s), details of sanctions and date (s) etc. and Utilization Certificate (UC)/ present status thereof: Select Any Assistance/GIA taken from the Government of India/Foreign Government, along with the details of the project(s), details of sanctions and date (s) etc. and Utilization Certificate (UC)/ present status thereof Yes/No from dropdown
- Copy Of In -principle Approval Of Public Sector Bank : Click  to upload file
- Certificate on Rs.100/- stamp paper duly Notarized to the effect that no criminal proceedings or otherwise by any legal or other authority are pending or contemplated as per format at Annex E.: Click  to upload file
- Bank Details Of Last One Year: Click  to upload file
- Copy of Bye-laws (other than state government): Click  to upload file
- Copy of bank statement of the organization for last six months (Other than state Government): Click  to upload file
- Copy of certificate abiding to terms and conditions (Annexure B): Click  to upload file
- Project proposal in details with application format(as per the scheme guidelines): Click  to upload file
- State Certificate (Annexure C): Click  to upload file
- Major Achievement of the organization in last 5 years (Annual reports): Click  to upload file
- Details of infrastructure available in the organization along with equipment, vehicle etc.: Click  to upload file
- NGO Certificate: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **Prakash Kumar**  
Your application NO.200122/100428 has been submitted successfully for Central Sector Scheme for Establishment of Ayush Super Specialty Hospitals/ Day Care Center On Ayush.  
Kindly quote your application NO. 200122/100428 in all future correspondence and keep checking status of your application on your dashboard.  
Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-184

On successful submission of form following message will be displayed:

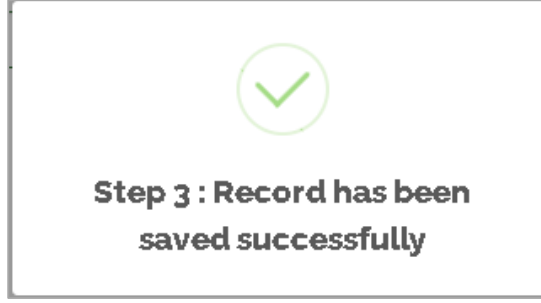


Figure 8-185



### 8.11.1.4 View Applications

Frontend user can search application by entering search terms in search textbox

Central Sector Scheme for Establishment of Ayush Super Specialty Hospitals/ Day Care Center will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-D         | 200122/100428    | 20-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-A         | 200122/100427    | 20-Jan-2022  | Submitted |        |
| 3      | Bhawana Sewa Sansthan | IC-A         | 200122/100426    | 20-Jan-2022  | Submitted |        |
| 4      | Bhawana Sewa Sansthan | IEC-B        | 200122/100425    | 20-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100423    | 20-Jan-2022  | Forward   |        |
| 6      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100422    | 20-Jan-2022  | Submitted |        |
| 7      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100421    | 20-Jan-2022  | Submitted |        |
| 8      | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 200122/100434    | 20-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100433    | 20-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | NMPB-B       | 200122/100432    | 20-Jan-2022  | Draft     |        |

Showing 1 to 10 of 134 entries

Previous 1 2 3 4 5 ... 14 Next

Figure 8-186

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details
- Click (edit) to edit application details



8.11.1.5 Download application

**Applications**

Show 10 entries Search:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 21     | Bhawana Sewa Sansthan | NMPB-A       | 250122/100441    | 25-Jan-2022  | Rejected  |        |
| 22     | Bhawana Sewa Sansthan | NMPB-A       | 240122/100440    | 24-Jan-2022  | Submitted |        |
| 23     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 240122/100439    | 24-Jan-2022  | Submitted |        |
| 24     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 240122/100438    | 24-Jan-2022  | Submitted |        |
| 25     | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 240122/100437    | 24-Jan-2022  | Submitted |        |
| 26     | Bhawana Sewa Sansthan | IC-D         | 200122/100428    | 20-Jan-2022  | Submitted |        |
| 27     | Bhawana Sewa Sansthan | IC-A         | 200122/100427    | 20-Jan-2022  | Rejected  |        |
| 28     | Bhawana Sewa Sansthan | IC-A         | 200122/100426    | 20-Jan-2022  | Approved  |        |
| 29     | Bhawana Sewa Sansthan | IEC-B        | 200122/100425    | 20-Jan-2022  | Draft     |        |
| 30     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100423    | 20-Jan-2022  | Forward   |        |

Showing 21 to 30 of 160 entries

Previous 1 2 3 4 5 ... 16 Next

Figure 8-187

Click to view & download application

**Central Sector Scheme for Establishment of Ayush Super Specialty Hospitals/ Day Care Center**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION** [Click to download application](#)

Name of the organization: Bhawana Sewa Sansthan  
Address: 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003  
Email Address: prafuljansari@silvertouch.com  
Contact No.: 9090909090  
Mobile No.: 8563214775

| Year | Financial turnover of the organization. | Profit / loss with amount. | Balance sheet |
|------|---|----------------------------|---------------|
| 2015 | 2000                                    | 5000                       |               |

Figure 8-188

Click [Download Pdf](#) to download application in PDF



8.11.2 Central sector scheme for skill development under Champion services Sector scheme

8.11.2.1 Details of the Organization

### DETAILS OF THE ORGANIZATION

Name of the organization\*  
Bhawana Sewa Sansthan

Address\*  
417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003

Contact No.\*  
9090909090

Mobile No.\*  
9090909090

Email Address\*  
prafuljansari@silvertouch.com

Registration Number\*  
925/2003-04

Registration Date\*  
09-01-2004

Year of establishment\*  
Select Year of establishment

#### ABSTRACT OF AUDITED ANNUAL ACCOUNTS OF LAST FIVE YEARS

| Year*  | Financial turnover of the organization* | Profit / loss with amount* | Balance sheet*  |
|--------|---|----------------------------|---|
| Select | Financial turnover of the organizati    | Profit / loss with amount  | Choose File No file chosen<br>Allowed pdf,xlsx formats.<br>Optimal Size : 2MB |

#### NAME OF THE SKILL DEVELOPMENT PROGRAM TO BE CONDUCTED

| 1. Name of the Organisation/Institute * | 1. Name of the skill courses to be conducted*<br>2. Duration* | 1. Number of candidates*<br>2. Number of trainings to be conducted* |
|---|---|---|
| Name of the Organisation/Instit         | Name of the skill courses to be cond<br>Select                | Number of candidates<br>Number of trainings to be conducted         |

Executive summary of the proposal point wise as per Annexure -G\*

Click to save organization details and move to next form

Click to save organization details and submit later

Save Draft Save & Next

Figure 8-189



**Enter following details:**

- Name of the organization will be displayed automatically
- Address will be displayed automatically
- Email Address will be displayed automatically
- Mobile No will be displayed automatically
- Type of Applicant: Select type of applicant from dropdown
- Sub-Type of Applicant: Select type of sub-type applicant from dropdown
- Contact Number will be displayed automatically
- Registration Number will be displayed automatically
- Registration Date will be displayed automatically
- Year of establishment Select year of establishment from calendar
- Year: Select year from dropdown
- Financial turnover of the organization: Enter financial turnover of the organization
- Profit / loss with amount: Enter profit / loss with amount:
- Balance sheet: Enter balance sheet
  - Click  to upload file
- Name of the Organisation/Institute: Enter name of the Organisation/Institute:
- Name of the skill courses to be conducted: Enter Name of the skill courses to be conducted
- Duration: Select duration from dropdown
- Number of candidates: Enter number of candidates:
- Number of trainings to be conducted: Enter number of trainings to be conducted
- Executive summary of the proposal point wise as per Annexure –G: Enter executive summary of the proposal point wise as per Annexure –G
- Click  to save organization details and submit later
- Click  to save organization details and move to next form






8.11.2.2 Project Details

**PROJECT DETAILS** ▼

Details of the existing infrastructure, if any

Rationale for proposed location in terms of transportation, basic infrastructure etc.\*

**DETAILS OF TECHNICAL AND OTHER PERSONNEL**

| Name*                             | Designation*                             | CV*  | Date of appointment*                             | <span>+</span> |
|-----------------------------------|--|--|--|----------------|
| <input type="text" value="Name"/> | <input type="text" value="Designation"/> | <input type="button" value="Choose File"/> No file chosen<br><small>Allowed pdf formats.<br/>Optimal Size : 2MB</small><br> | <input type="text" value="Date of appointment"/> |                |

**YEAR WISE ACTIVITIES AND ACHIEVEMENTS OF THE ORGANIZATION DURING LAST 5 YEARS**

| Year*                               | Achievement*                             | <span>+</span> |
|-------------------------------------|--|----------------|
| <input type="text" value="Select"/> | <input type="text" value="Achievement"/> |                |

Figure 8-190



**YEAR WISE ACTIVITIES AND ACHIEVEMENTS OF THE ORGANIZATION DURING LAST 5 YEARS**

| Year*  | Achievement* |   |
|--------|--------------|---|
| Select | Achievement  | + |

Justifications why investor(s) is/are keen to undertake this project with their vision etc.\*

Total amount of financial assistance needed for training programs\*

Any other relevant information\*

Description

Attachment

Choose File No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**IN CASE OF THE ACCOMMODATION AVAILABLE WITH ORGANIZATION/INSTITUTE, PROOF OF POSSESSION OF LAND/ACCOMMODATION IN THE FORM OF SALE DEED/LEASE DEED.**

| Description* | Attachment*                |   |
|--------------|----------------------------|---|
| Description  | Choose File No file chosen | + |

Allowed pdf formats.  
Optimal Size : 2MB

Figure 8-191

**PROOF OF POSSESSION OF OTHER INFRASTRUCTURE FOR CONDUCTING THE TRAINING PROGRAMS INCLUDING POWER, WATER, TEACHING FACULTY, SUPPORTING STAFF, EQUIPMENT/LABS ETC.**

| Description* | Attachment*                |   |
|--------------|----------------------------|---|
| Description  | Choose File No file chosen | + |

Allowed pdf formats.  
Optimal Size : 2MB

**SKILL COURSES**

| Name of the skill course | Mode of training |   |
|--------------------------|------------------|---|
| Select                   | Select           | + |

Click to go to previous form

Click to submit form details

Click to save form details and submit later

Previous Save Draft Save & Next

Figure 8-192



**Enter following details:**

- Details of the existing infrastructure, if any: Enter details of the existing infrastructure, if any
- Rationale for proposed location in terms of transportation, basic infrastructure etc.: Enter rationale for proposed location in terms of transportation, basic infrastructure etc.:
- Name: Enter name
- Designation: Enter designation
  - CV: Click  to upload file
- Date of appointment: Select date of appointment from calendar
- Click  to add more details of technical and other personnel
- Year: Select year from dropdown
- Achievement: Enter achievement
- Justifications why investor(s) is/are keen to undertake this project with their vision etc.:
- Total amount of financial assistance needed for training programs:
- Description: Enter description
- Attachment: Click  to upload file
- Description: Enter description
- Attachment: Click  to upload file
- Click  to add more details of in case of the accommodation available with organization/institute, proof of possession of land/accommodation in the form of sale deed/lease deed
- Description: Enter description
- Attachment: Click  to upload file
- Click  to add more details proof of possession of other infrastructure for conducting the training programs including power, water, teaching faculty, supporting staff, equipment/labs etc.
- Name of the skill course: Enter name of the skill course
- Mode of training: Select mode of training from dropdown
- Click  to add more details proof of skill courses
- Click  to go to previous form
- Click  to save project details and submit later
- Click  to project details and move to next form



## 8.11.2.3 Attachments

**ATTACHMENTS**

**Attested copy Registration certificate under Societies registration act/trust/Companies etc.\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of attested copy of Bye-laws\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**COPY OF AUDITED STATEMENT OF ACCOUNTS FOR LAST FIVE YEARS**

| Years* | Attachment*   |                   |
|--------|---|-------------------|
| Select | <input type="button" value="Choose File"/> No file chosen | <a href="#">+</a> |
|        | Allowed pdf formats.<br>Optimal Size : 2MB                |                   |

**Copy of Bond on Rs. 100/- stamp paper duly notarized to abide by all terms & conditions of the guidelines of the scheme, sanction letter, GFR etc. as per annexure -D of the scheme guidelines\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of certificate of experience of the training institute in conducting training programs in Health Care Services/Sector\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of certificate on Rs. 100/- stamp paper notarized to the effect that no criminal proceedings are pending or contemplated\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Copy of bank account details for last 1 year\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

**Any Assistance/GIA taken from the Government of India/Foreign Government, along with the details of the project(s), details of sanctions and date (s) etc. and Utilization Certificate (UC)/ present status thereof.\***

Select Any Assistance/GIA taken from the Government of India... ▾

**Copy of Appointment Letter\***

No file chosen

Allowed pdf formats.  
Optimal Size : 2MB

Click to go to previous form

Click to submit form details

Previous

Click to save form details and submit later

Save Draft

Submit

Figure 8-193



**Enter following details:**

- Attested copy Registration certificate under societies registration act/trust/Companies etc.: Click  to upload file
- Copy of registration as a teaching/training institute: Click  to upload file
- Copy of attested copy of Bye-laws: Click  to upload file
- Years: Select year from dropdown
- Attachment: Click  to upload file
- Copy of Bond on Rs. 100/- stamp paper duly notarized to abide by all terms & conditions of the guidelines of the scheme, sanction letter, GFR etc. as per annexure -D of the scheme guidelines: Click  to upload file
- Copy of certificate of experience of the training institute in conducting training programs in Health Care Services/Sector: Click  to upload file
- Copy of certificate on Rs. 100/- stamp paper notarized to the effect that no criminal proceedings are pending or contemplated: Click  to upload file
- Copy of bank account details for last 1 year: Click  to upload file
- Any Assistance/GIA taken from the Government of India/Foreign Government, along with the details of the project(s), details of sanctions and date (s) etc. and Utilization Certificate (UC)/ present status thereof.: Select Any Assistance/GIA taken from the Government of India/Foreign Government, along with the details of the project(s), details of sanctions and date (s) etc. and Utilization Certificate (UC)/ present status thereof from dropdown
- Any Assistance/GIA taken from the Government of India/Foreign Government, along with the details of the project(s), details of sanctions and date (s) etc. and Utilization Certificate (UC)/ present status thereof: Select Any Assistance/GIA taken from the Government of India/Foreign Government, along with the details of the project(s), details of sanctions and date (s) etc. and Utilization Certificate (UC)/ present status thereof Yes/No from dropdown
- Copy of Appointment Letter: Click  to upload file
- Certificate on Rs.100/- stamp paper duly Notarized to the effect that no criminal proceedings or otherwise by any legal or other authority are pending or contemplated as per format at Annex E.: Click  to upload file
- Bank Details Of Last One Year: Click  to upload file
- Copy of Bye-laws (other than state government): Click  to upload file
- Copy of bank statement of the organization for last six months (Other than state Government): Click  to upload file
- Copy of certificate abiding to terms and conditions (Annexure B): Click  to upload file
- Project proposal in details with application format(as per the scheme guidelines): Click  to upload file
- State Certificate (Annexure C): Click  to upload file
- Major Achievement of the organization in last 5 years (Annual reports): Click  to upload file



- Details of infrastructure available in the organization along with equipment, vehicle etc.: Click  to upload file
- NGO Certificate: Click  to upload file
- Click  to go to previous form
- Click  to save attachments and submit later
- Click  to submit form details

Once the application is successfully submitted, frontend user will receive email from respective organization

Dear **Prakash Singh**,  
Your application NO. 200122/100427 has been submitted successfully for Central sector scheme for skill development under Champion services Sector Scheme On Ayush.

Kindly quote your application NO. 200122/100427 in all future correspondence and keep checking status of your application on your dashboard.

Thank you.  
Ministry of Ayush,  
Government of India

Figure 8-194

On successful submission of form following message will be displayed:

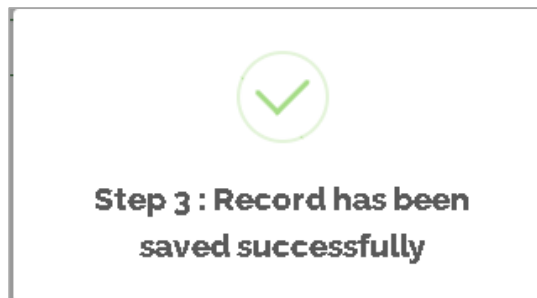


Figure 8-195



### 8.11.2.4 View Applications

Frontend user can search application by entering search terms in search textbox

Central sector scheme for skill development under Champion services Sector scheme will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-D         | 200122/100428    | 20-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-A         | 200122/100427    | 20-Jan-2022  | Submitted |        |
| 3      | Bhawana Sewa Sansthan | IC-A         | 200122/100426    | 20-Jan-2022  | Submitted |        |
| 4      | Bhawana Sewa Sansthan | IEC-B        | 200122/100425    | 20-Jan-2022  | Draft     |        |
| 5      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100423    | 20-Jan-2022  | Forward   |        |
| 6      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100422    |              |           |        |
| 7      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100421    |              |           |        |
| 8      | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 200122/100434    | 20-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100433    | 20-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | NMPB-B       | 200122/100432    | 20-Jan-2022  | Draft     |        |

Showing 1 to 10 of 134 entries

Previous 1 2 3 4 5 ... 14 Next

Figure 8-196

- Sr. No.
- Organization Name
- Scheme
- Reference Number
- Created Date
- Status
- Action:
- Click (details) to view application details



## 8.11.2.5 Download application

**Applications**

Show  entries Search:

| Sr No. | Organization Name     | Scheme       | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------------|------------------|--------------|-----------|--------|
| 21     | Bhawana Sewa Sansthan | NMPB-A       | 250122/100441    | 25-Jan-2022  | Rejected  |        |
| 22     | Bhawana Sewa Sansthan | NMPB-A       | 240122/100440    | 24-Jan-2022  | Submitted |        |
| 23     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 240122/100439    | 24-Jan-2022  | Submitted |        |
| 24     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 240122/100438    | 24-Jan-2022  | Submitted |        |
| 25     | Bhawana Sewa Sansthan | CSSS-MVT(SD) | 240122/100437    | 24-Jan-2022  | Submitted |        |
| 26     | Bhawana Sewa Sansthan | IC-D         | 200122/100428    | 20-Jan-2022  | Submitted |        |
| 27     | Bhawana Sewa Sansthan | IC-A         | 200122/100427    | 20-Jan-2022  | Submitted |        |
| 28     | Bhawana Sewa Sansthan | IC-A         | 200122/100426    | 20-Jan-2022  | Approved  |        |
| 29     | Bhawana Sewa Sansthan | IEC-B        | 200122/100425    | 20-Jan-2022  | Draft     |        |
| 30     | Bhawana Sewa Sansthan | CSSS-MVT(AH) | 200122/100423    | 20-Jan-2022  | Forward   |        |

Showing 21 to 30 of 160 entries 
[Previous](#)
[1](#)
[2](#)
[3](#)
[4](#)
[5](#)
[...](#)
[16](#)
[Next](#)

Figure 8-197

Click to view & download application

**Central sector scheme for skill development under Champion services Sector scheme**

[Download Pdf](#) Click to download application

**DETAILS OF THE ORGANIZATION**

|                                 |  |
|---------------------------------|--|
| <b>Name of the organization</b> | <b>Address</b>   |
| Bhawana Sewa Sansthan           | 417/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| <b>Contact No.</b>              | <b>Mobile No.</b>  |
| 9090909090                      | 9090909090   |
| <b>Email Address</b>            | <b>Registration Number</b>   |
| prafuljansari@silvertouch.com   | 925/2003-04  |
| <b>Registration Date</b>        | <b>Year of establishment</b>                                       |
| 09-01-2004                      | 1990   |

| Year | Financial turnover of the organization | Profit / loss with amount | Balance sheet |
|------|--|---------------------------|---------------|
| 2015 | 5000000                                | 1000000                   |               |


Figure 8-198

Click [Download Pdf](#) to download application in PDF





## 9 My Application

Click  to view application

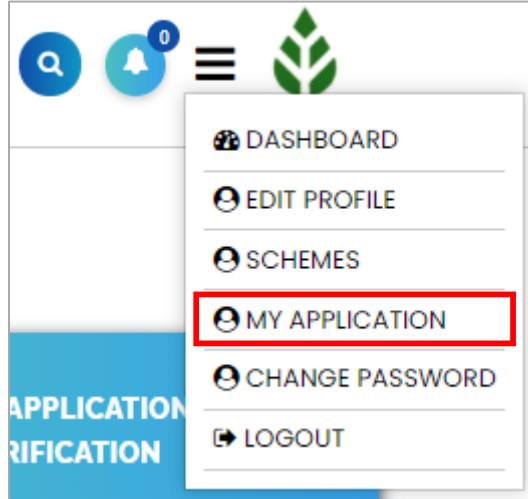


Figure 9-1

Frontend user can view applied applications for various schemes

Frontend user can search application by entering search terms in search textbox

Component 3(B) (b): Application for Market authorization of AYUSH products at regulatory bodies of different countries will be displayed with following column headings:

| Sr No. | Organization Name     | Scheme | Reference Number | Created Date | Status    | Action |
|--------|-----------------------|--------|------------------|--------------|-----------|--------|
| 1      | Bhawana Sewa Sansthan | IC-C   | 040122/100391    | 04-Jan-2022  | Submitted |        |
| 2      | Bhawana Sewa Sansthan | IC-C   | 040122/100390    | 04-Jan-2022  | Draft     |        |
| 3      | Bhawana Sewa Sansthan | IC-E   | 040122/100389    |              |           |        |
| 4      | Bhawana Sewa Sansthan | IC-B   | 040122/100388    |              |           |        |
| 5      | Bhawana Sewa Sansthan | IC-B   | 040122/100387    | 04-Jan-2022  | Draft     |        |
| 6      | Bhawana Sewa Sansthan | IC-B   | 040122/100386    | 04           |           |        |
| 7      | Bhawana Sewa Sansthan | IC-D   | 030122/100383    | 03           |           |        |
| 8      | Bhawana Sewa Sansthan | IC-A   | 030122/100382    | 03-Jan-2022  | Submitted |        |
| 9      | Bhawana Sewa Sansthan | EMR    | 030122/100381    | 03-Jan-2022  | Submitted |        |
| 10     | Bhawana Sewa Sansthan | EMR    | 030122/100380    | 03-Jan-2022  | Draft     |        |



Showing 1 to 10 of 128 entries

Previous 1 2 3 4 5 ... 13 Next

Figure 9-2

- Sr. No.
- Organization Name
- Scheme
- Reference Number



- Created Date
- Status
- Action:
- Click  (details) to view application details
- Click  (edit) to edit application details

### 9.1 View Application

**Component 3(B)(b):Application for Market authorization of AYUSH products at regulatory bodies of different countries**

[Download Pdf](#)

**DETAILS OF THE ORGANIZATION** ▼

|                                       |  |
|---------------------------------------|--|
| Name of the Organization (Unit etc)   | Address  |
| Bhawana                               | 7/167 Niwazganj (Near T. B. Hospital) Thakurganj, Lucknow 226003 |
| Email                                 | Contact No.  |
| prafuljansari@silvertouch.com         | 9090909090   |
| Organization Type                     | Registration Number  |
| Non-Profit Non-Govt. Organisations    | 925/2003-04  |
| Registration Date                     | GMP Certificate Number   |
| 09-01-2004                            | aaa  |
| Import Export Certificate(IEC) Number | Any Other Information (if any)                                   |
| aaa                                   |  |

[Next](#)


**PROJECT DETAILS** ▼

Figure 9-3

Click [Download Pdf](#) to download application details in PDF.



## 10 Change Password

Click  to change password

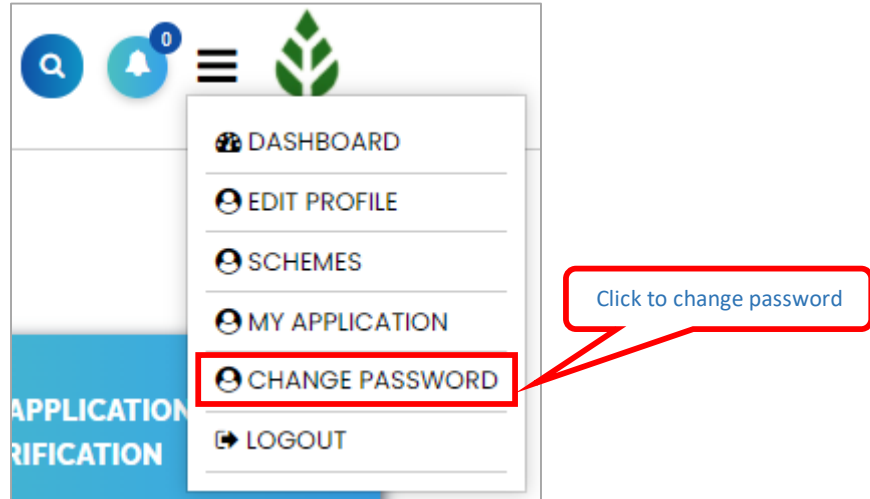


Figure 10-1

## Change Password

Old Password\*

New Password\*

Confirm New Password\*

X 9 j i  
q

Captcha

Change Password

Click to change password

Figure 10-2

Enter following details:


- Old Password Enter old password
- New Password: Enter new password
- Confirm New Password: Enter confirm new password
- Enter Captcha as displayed



- Click [Change Password](#) to change password



## 11 Logout

Click  to sign out from Ayush NGO portal

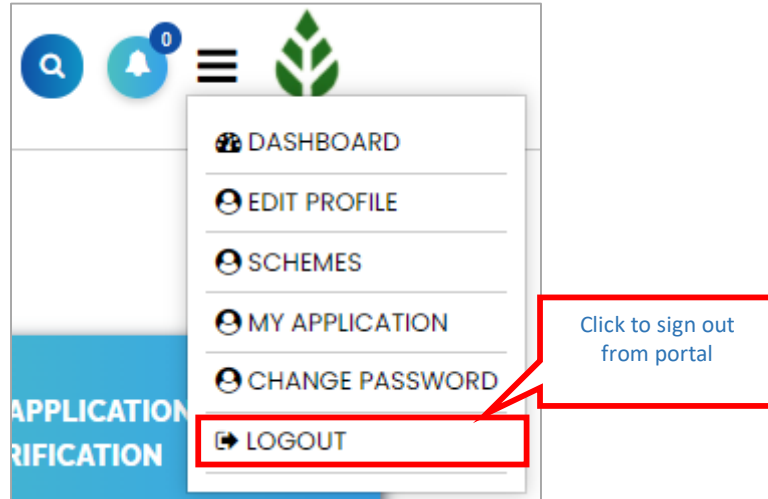


Figure 11-1