

Form - Development Commissioner Handicrafts(M/o Textiles)-Registration

:: Contact Person Details ::

Name *	<input type="text"/>
Address *	<input type="text"/>
Email *	<input type="text"/>
Phone No *	<input type="text"/>

APPLICANT DETAILS

NAME *	<input type="text"/>
DESIGNATION *	<input type="text" value="- select -"/>
DATE OF BIRTH * (yy/mm/yyyy)	<input type="text"/>
GENDER *	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Trans Gender
FULL ADDRESS WITH PIN NO *	<input type="text"/>
MOBILE NO *	<input type="text"/>
E-MAIL ID	<input type="text"/>
AADHAAR NO	<input type="text"/>

ORGANIZATION DETAILS

NAME OF ORGANIZATION / VO *	<input type="text"/>
ORGANIZATION PAN NO *	<input type="text"/>
NITI AAYOG ID *	<input type="text"/>
NITI AAYOG LOGIN PASSWORD	<input type="text"/>
ORGANIZATION REGISTRATION NO *	<input type="text"/>
ORGANIZATION REGISTRATION DATE * (dd/mm/yyyy)	<input type="text"/>
REGISTRATION VALID UP TO (dd/mm/yyyy)	<input type="text"/>
FULL ADDRESS WITH PIN NO *	<input type="text"/>
MOBILE NO *	<input type="text"/>
E-MAIL ID * (Please give same Email ID as provided on NITI Aayog Portal.)	<input type="text"/>

OTHER INFORMATION

BLACK LISTED WITH STATE OR CENTRAL GOVT. AGENCIES ? *	<input type="radio"/> Yes <input type="radio"/> No
IS YOUR NGO REGISTERED ENTITY AND MINIMUM 3 YEARS OLD ? *	<input type="radio"/> Yes <input type="radio"/> No
DO YOU HAVE EXPERIENCE IN THE AREA OF LIVELIHOOD IN UNORGANIZED SECTOR ? *	<input type="radio"/> Yes <input type="radio"/> No
IF YES, GIVE DETAILS	<input type="text"/>

AREA OF WORK / CRAFT

DOCUMENTS

ORGANIZATION REGISTRATION CERTIFICATE *	<input type="button" value="Browse..."/> No file selected.
ORGANIZATION PAN CARD *	<input type="button" value="Browse..."/> No file selected.
LAST 3 YEAR AUDITED BALANCE SHEET *	<input type="button" value="Browse..."/> No file selected.
LAST 3 YEAR INCOME TAX RETURNS *	<input type="button" value="Browse..."/> No file selected.
MEMORANDUM OF ASSOCIATION	<input type="button" value="Browse..."/> No file selected.
APPLICANT IDENTITY PROOF *	<input type="button" value="Browse..."/> No file selected.

SPONSORED INFORMATION AND FINAL SUBMISSION

SPONSORED NAME *	<input type="radio"/> Yes <input type="radio"/> No
IF Yes, GIVE THE SPONSORED USERNAME	<input type="text"/>