



Collectorate: Gajapati
District Office: Mission Shakti
(S. W. Section)

Phone No. 06815-222025

Email – dswogajapati@nic.in gajapati.missionshakti@gmail.com

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Notice for Expression of Interest for Handicrafts Sector

Letter No.: - ୫୭୩ /SW

Date: - 06 .07.2022

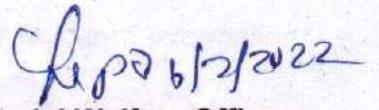
Interested WSHG/Federation having willingness and aptitude for different activities under **Handicrafts Sector** is invited to submit their proposal before the concerned CDPO in the mentioned format (enclosed as Annexure-II) within 15 (fifteen) days of this notice i.e. by 19th July, 2022 towards **different activities in Handicrafts Sector under Handlooms, Textile & Handicrafts Department**. SHGs should be from the same Block where they propose to take up the activity. Block and different activities wise target is enclosed in Annexure-I.

Detailed eligibility criteria, selection procedure and application form is available in the Gajapati District Website i.e. www.gajapati.nic.in

The application must reach within the scheduled date and time at the office of the concerned CDPO of ICDS project Gosani/ Gumma/ Kashinagar/Mohana/Nuagada and Rayagada. Application received after due date will be rejected.

Date of receipt of the applications with effect from: - 06.7.2022

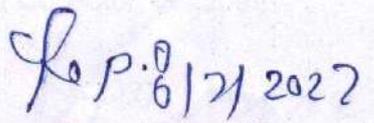
Last date for receiving the completed applications: - 19.07.2022

F8. 
District Social Welfare Officer,
Gajapati

Memo No.: - ୫୭୫ /SW

Date: - 06 .07.2022

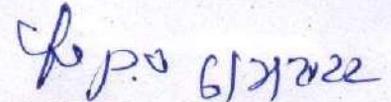
Copy to D.I.O, NIC Gajapati, Paralakhemundi for information with a request to webhost the notice.

F8. 
District Social Welfare Officer,
Gajapati

Memo No.: - 895 /SW

Date: - 06 .07.2022

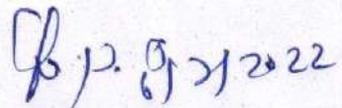
Copy to Assistant Director (Handicrafts), Gajapati for favour of information and with a request to circulate this among their block officials for selection of eligible applicant.

FS. 
District Social Welfare Officer,
Gajapati

Memo No.: - 896 /SW

Date: - 06.07.2022

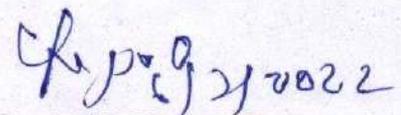
Copy to CDPO Gosani/ Gumma/ Kashinagar/Mohana/Nuagada and Rayagada of this District for information and instructed to display the notice and the format in their office and in all AWCs/Federations of their concerned block for fifteen days. The applications should be received as per the above notification with in the due dateline. They are requested to facilitate selection of willing and eligible WSHG members to take up this activity in accordance with the enclosed guideline.

FS. 
District Social Welfare Officer,
Gajapati

Memo No.: - 898 /SW

Date: - 06 .07.2022

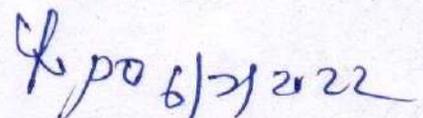
Copy to Block Development Officers of Gosani/ Gumma/ Kashinagar/Mohana/Nuagada and Rayagada of this District for favour of information and necessary action.

FS. 
District Social Welfare Officer,
Gajapati

Memo No.: - 899 /SW

Date: - 06 .07.2022

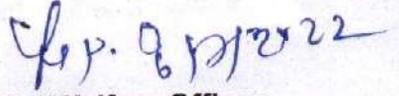
Copy submitted to PA to collector for kind information of Collector, Gajapati.

FS. 
District Social Welfare Officer,
Gajapati

Memo No.: - 899 /SW

Date: - 06.07.2022

Copy submitted to PD, DRDA Gajapati for favour of kind information.

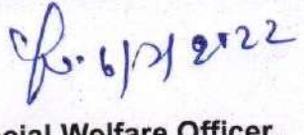
for. 

District Social Welfare Officer,
Gajapati

Date: - 06.07.2022

Memo No.: - 900 /SW

Copy submitted to Joint Secretary to Govt, Department of Mission Shakti, for favour of kind information.

for. 

District Social Welfare Officer,
Gajapati



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Block Wise & Activity wise Target

Annexure - I

Sl. No.	Name of the Scheme	Name of the Craft	Name of the Block	No. of Batch	Time Period
1	MCM Training Programme	Cane & Bamboo	Gumma	02 (15 trainees each)	06 months
2	MCM Training Programme	Cane & Bamboo	Rayagada	02 (15 trainees each)	06 months
3	MCM Training Programme	Terracotta & Pottery	Gosani	02 (15 trainees each)	06 months
4	MCM Training Programme	Embroidery	Gosani (Paralakhemundi Municipality)	02 (15 trainees each)	06 months
5	MCM Training Programme	Embroidery	Kashinagar	02 (15 trainees each)	06 months
6	MCM Training Programme	Terracotta & Pottery	Mohana	02 (15 trainees each)	06 months
2	MCM Training Programme	Cane & Bamboo	Nuagada	02 (15 trainees each)	06 months

Criteria for SHG Identification

The following criteria should be followed for SHG identification: -

1. Age Limit of members should be 18- 50 yr.
2. All members must have an active Bank Account.
3. Members must not be a bank loan defaulter.

Specification of MCM Training Programme

1. Number of Candidates per batch – 15 nos.
2. Age limit of candidates 18-50 yr.
3. Training Period: - 06 months
4. Monthly Remuneration to each trainee: - Rs.1000/-
5. Monthly Rent for Training Centre: - Rs.2000/-
6. Raw Material per month: - Rs.4500/-
7. Tools & equipment per trainee: - Rs.1500/-

The trained candidates will be financially assisted through loan under the scheme Silpi Unnati Yojana (SUJ) up to Rs. Rs.50000/-. There is a total of 20% Margin Money Subsidy for the loan.



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Annexure-II

Format

Notice for the taking up the activity _____

1. Name of the WSHG / Federation: _____
2. SHG / Federation Address (as applicable):
Village _____ Post Office _____
GP _____ Block _____
District _____ PIN _____
ICDS Project _____
3. Year of Formation: _____
4. Present livelihood activities undertaking: _____
5. Name of the Village/ward where the activity will be taken up: _____
6. Whether the SHG undergone training at weaver co-operative society/ Block level cluster and any other training programmes as per on going schemes of Handlooms Textile & Handicrafts Department on corresponding of Handicrafts activities: - (Yes/No) _____
(If yes, mention details)
7. Bank, Branch Name: _____
8. Funds available in the Savings Bank Account: Rs. _____
9. Whether following activities are practised:
 - (a) Regular Saving (Yes/No)
 - (b) Amount of saving (in Rs.)
 - (c) Whether Loan taken (Yes/No), if yes, mention the number of times loan availed
 - (d) Mode of loan repayment (Regular/irregular):
 - (e) Meeting Register maintained (Yes/No)
 - (f) Cash Book maintained (Yes/No)
10. Contact No: _____
11. Resolution of the SHG to take up the activity is enclosed (Yes/No):

Name & Signature of the authorised person of the WSHG

Date:

Acknowledgement

Received the Expression of Interest from _____ SHG, Village _____, on date _____ for the activity titled _____ under Handlooms, Textiles and handicrafts department.

Signature of the CDPO/Authorised signatory