State Leprosy Society	Department
Station	NO
Dated the	
EQDIVADE	A E D

## **FORWARDED**

This institution has been visited by the Director of Medical Services/District Medical Officer/Civil Surgeon...........(Place). The State Leprosy Society recommends that a grant of Rs...... is considered essential for the development of an efficient working of leprosy SET Work , for the year ............

## It is also certified that:

- 1. The State Leprosy Society has examined the audited statement of accounts of ....... for the last three years and are satisfied that the grant in aid asked for by them is justified by their financial position and that all previous grants received by them from various sources, have been spent for the purpose for which the grants were sanctioned.
- 2. The State Leprosy Officer is satisfied that the institution has the experience and managerial ability to carry out the purpose for which the grant of financial assistance has been asked for.
- 3. There is nothing against the organisation or its office bearers, staff which should disqualify them from receiving the financial assistance from the Govt. of India. It is also certified that the institution is not involved in any corrupt practices.
- **4.** The institution is not of a local character.
- **5.** The State Leprosy Officer / District Leprosy Officer has visited the institution on ...... and is satisfied with the work of the institution.
- 6. The working unit urban area areas covered by the institution are not covered by any other Central Government / State Government / Voluntary Organisation. The leprosy disabled persons are provided free services by the NGO in rural areas.

Signature and Designation

To

The Secretary to the Govt. of India, Ministry of Health & Family Welfare, NEW DELHI