

**Guidelines for criteria of selection/recommendation of various categories for National Awards**

**1. For Artisans: (Spinners, Weavers, V.I. Artisans)**

- a) He/She should be regular Worker/Artisan, at least for last 5 years, of the certified/bonafied KVI Institution/unit of KVIC or KVIB.
- b) His/Her specialty of work must be reflected in consideration for award and at least 50% target (as per capacity of implement) of work, should be completed during the year.
- c) He/She should not be receiver of same Award during last 3 years, proceeding the current year.
- d) He/She should not be below 18 years old.
- e) Any other point, in addition to the above as per recommendation of the committee.

**2. For Khadi/V.I. Institutions, REGP/PMEGP Units, SFURTI Clusters.**

- a) Khadi Institution/REGP/PMEGP unit should have valid registration certificate from competent authorities, and in case of Khadi work it should have a live Khadi certificate from KVIC, as on date.
- b) The institution/Unit should not be involved in any unconstitutional work and should not be defaulter of KVIC or Bank or for other schemes of KVIC.
- c) The institution/unit should be regular in the work and have been achieving a sustainable growth rate for at least last 3 (three) years.
- d) The institution/unit should not be run in losses during the last 2 years.
- e) Specialties of work which includes the product development, licensing from ISO, BIS, Agmark, quality, packaging, higher wage component paid to workers, better management skill, welfare measures for artisans/workers, creation of new designs, products etc. should be reflected as sustainable criteria for recommendation.
- f) Special achievement/action which includes creation of new employment to rural artisans, coverage of SC/ST/Women, hill border areas etc. would also be the criteria for selection.

**3. Criteria for Training Centers, PMEGP Banks, PRODIP & RISC project:**

- a) It should be recommended mainly based on their performance during last year and overall performance of the last three (3) years.
- b) Creation of new product, designs and intervention and its coverage in case of PRODIP & RISC projects.
- c) Targets and achievements for arranging training courses and getting the volume of IRG for training centers.

- d) Volume of Sanction/Distribution of funds to KVI/REGP/PMEGP units by the commercial Banks and utilizing the margin money under the scheme in every zone and at National level.

#### **4. Criteria for State KVI Board:**

- a) The recommendation of the KVI Board should be considered on the basis of implementation of KVI programme, recoveries and payment of dues to KVIC, proper accounting system, account reconciliation with KVIC A/c and all other details called in the format.
- b) Timely reconstitution of the Board as well as proper supporting grant for establishment.
- c) Running dept. programme, establishing training centers, laboratories etc.
- d) PMEGP implementation and coverage of the targets in respect of all other schemes of the Commission.
- e) Achievement during last year and progress there upon.

#### **5. Best Departmental Sales Outlet, Central Sliver Plant, Industry Specific Trading Units (Bee-keeping, HMPI, Khadi, Leather etc.):**

- a) The recommendation of the Departmental Sales Outlet/CSP/Industry Specific Trading Units should be considered on the basis of the proper accounting system/audited accounts for the year 2015-16/2016-17/2017-18 and other details called in the format.
- b) The Unit should not be involved in any unconstitutional work.
- c) The Unit should be regular in the work and have been achieving sustainable growth rate for at least last 3 (three) years.
- d) The Unit should not be run in losses at least for last 2 years.
- e) Specialties of work which includes the product development, licensing from ISO, BIS, Agmark, quality, packaging, better management skill, creation of new designs, Export order etc should be reflected as sustainable criteria for recommendation.

#### **6. Best Export Oriented Unit in KVI Sector (Khadi, VI and REGP/PMEGP):**

- a) The conditions at point no: 2 in total.
- b) The Institution/Unit should be member of EPC-KVIC.
- c) As on date the institution/unit should be a member of EPC-KVIC (for existing members they should have renewed their membership with KVIC).
- d) The institution/unit should be regular in export work and at least last 3 (three) years data to be furnished alongwith supporting documents.
- e) The unit/institution should be regular in reporting the export data to KVIC.
- f) The export by the institution/unit may be direct/indirect export.

**Policy Committee:** For selection of the awardees

S.N.	Details of Member	Capacity in Policy Committee
1.	Chairman	Chairman
2.	C.E.O.	Member
3.	F.A.	Member
4.	Jt. CEO	Member
5.	Director (Marketing)	Member Convener

**Working Committee:** For recommendation of the awardees.

S.N	Details of Member	Capacity in Working Committee
1.	Jt. CEO	Chairman
2.	Director (KC/KPM)	Member
3.	Director (PMEGP)	Member
4.	Director(State Board Cell)	Member
5.	Director (SFURTI)	Member
6	Director (Marketing)	Member Convener

## METHODOLOGY

- (i) Application will be invited for the above category of awards through advertisement in news paper and on KVIC web site.
- (ii) The applications will be routed through concerned State/Divisional Directors and forwarded to director Marketing KVIC, Mumbai.
- (iii) The applications received will be scrutinised by a Zonal Committee under Chairmanship of Zonal Dy.C.E.O., State/Divisional Directors of the Zone, representative of Khadi Board, DIC and officials of State Bank of India (being the lead Bank of the country) and recommended list will be forwarded to Director Marketing to KVIC Mumbai.
- (iv) The recommended list will be placed before jury consisting of Chairman, KVIC, Secretary, MSME, CEO KVIC and Dy.C.E.O.s in Central Office and after approval of awardee list, the same shall be forwarded to Ministry of MSME.

**Note:**

- i) All the columns of the formats are required to be filled in all respect.
- ii) The incomplete format is liable for cancellation of nomination.
- iii) The information not applicable in the format should be strike out.

- iv) The information submitted in the format should be supported with documentary evidences.
- v) The photographs of the recommended awardees should be of high resolution with the attestation.
- vi) The Bank details of the cash awardees should contain Name & Addresss of the Bank, Account No. and IFC No.
- vii) The write-up about nominated awardees atleast in 100 words.
- viii) A copy of ID Card/Adhaar Card/Election Card/Driving License is must.
- ix) The telephone/mobile number of recommended awardees and his/her spouse is must.

### **How to apply**

Applications will be invited through advertisement in news papers and on KVIC website.

**FORMAT FOR RECOMMENDING THE NAME OF ARTISAN FOR  
NATIONAL AWARD FOR THE YEAR  
2015-16/2016-17/2017-18**

**Category- Khadi Spinner/Khadi Weaver/V.I. Artisan**

No.	<b>GENERAL INFORMATION (FOR ALL)</b>		
1	Name of Artisan		
2	Age		
3	Gender	Male	Female
4	Education		
5	Full address of artisan		
6	Tele/Mobile No. with code No.		
7	Name and address of Institution/Unit where he/She is working with phone no and code no.	Code No.	Phone No.
8	Category	General	OBC SC/ST
9	Period since working		
10	Whether he/she is traditional worker or new	Traditional	New
11	If new, from where he/she has get training.		
12	Type of work doing		
13	Whether any other member of his/her family is engaged with this work.		
14	Whether earlier he/she has got any Award from KVIC or any other organization.		
15	Whether he/she has innovated any new item, new equipment, new design etc. If yes, give details.		
16.	Details of the Bank	Name of the Bank A/c. No. IFS Code	

No.	<b>FOR SPINNER</b>	
1	Name of Charkha using	
2	Working at Home/Shed.	
3	No. of hours working in day	
4	No. of count of yarn spinning and No. of hangs	

5	Achievements during last 3 years	Count of yarn spun	Value of yarn (Rs.)	Wage earned (Rs.)
	2013-14			
	2014-15			
	2015-16			
	2016-17			
	2017-18			
6	Skill Development Trainings undertaken			
7	Use of health safety devices			
8	Coverage under Social Security Measures such as JBY, AWFT			
9	Aadhar linked bank account			
10	Specialization (if any) and other details for support.			
<b>FOR WEAVER</b>				
1	Name of Loom using			
2	Working at Home/Shed.			
3	No. of hours working in day			
4	No. of assisting persons from family			
5	Achievement during last 3 years (Rs. in lakhs)	Count of yarn spun	Value of yarn (Rs.)	Wage earned (Rs.)
	2013-14			
	2014-15			
	2015-16			
	2016-17			
	2017-18			
6	Skill Development Trainings undertaken			
7	Use of health safety devices			
8	Coverage under Social Security Measures such as JBY, AWFT			
9	Aadhar linked bank account			
10	Specialization (if any) and other details for support like creation of designs, Muslin and Silk weaving etc.			
<b>VILLAGE INDUSTRIES/REGP/PMEGP ARTISAN</b>				
1	Name of Machine using			
2	Working at Home/Shed.			

3	No. of hours working in day			
4	No. of assisting persons from family, if any			
5	Name of items produced With specification			
6	Achievement during last 3 years	Production (Qty)	Value (Rs.)	Wage earn (Rs.)
	2013-14			
	2014-15			
	2015-16			
	2016-17			
	2017-18			
7	Skill Development Trainings undertaken			
8	Use of health safety devices			
9	Coverage under Social Security Measures such as JBY, AWFT			
10	Aadhar linked bank account			
11	Specialization (if any) and other details for support like creation/invention of designs, quality etc			
12	Recommendation of Secretary/ Manager of the Institution/ Unit.			
13	Any other achievements/details related to product/unit for consideration of the award (attach separate sheet)			

## DECLARATION OF SPINNER/WEAVER/ARTISAN

I ( \_\_\_\_\_ (Name) \_\_\_\_\_ ), is  
a Bonafied, Worker/Artisan of \_\_\_\_\_

\_\_\_\_\_  
(Name of institution/Unit)

I also declare that I am not involved in any un-constitutional work and  
have not been punished by any court of India.

Photo  
of Artisan

(Signature/ Thumb of artisan)

Name \_\_\_\_\_

To be attested by Secretary/  
Manager of the Institution

Date: \_\_\_\_\_ Place: \_\_\_\_\_

## Certificate of Secretary/Manager of Institution/Unit

Certified that Shri/Smt./Km. \_\_\_\_\_  
is a bonafied worker/ artisan of this institution/unit and his/her  
declaration stated as above is correct as per my best knowledge/  
records. I recommend his/her name for National Award-2015-16/ 2016-  
17/2017-18 of KVIC.

(Signature of Secretary/Manager)

Name \_\_\_\_\_

Date :

Stamp

Place:

## RECOMMENDATION OF STATE/DIV.OFFICE/KVI BOARD

Signature of State/Divisional Director/CEO,KVI Board:

Name of Officer I/c \_\_\_\_\_

Name of Office \_\_\_\_\_

Stamp

## RECOMMENDATION OF ZONAL DY. CEO OF KVIC

Signature of Zonal Dy.CEO/Officer I/c \_\_\_\_\_

Name of Zonal Dy.CEO/Officer I/c \_\_\_\_\_

Name of Zone Office \_\_\_\_\_

Date-

Place-



## FORMAT-2

### FORMAT FOR RECOMMENDING THE NAME OF KHADI INSTITUTION FOR NATIONAL AWARD FOR THE YEAR 2015-16/2016-17/2017-18

No	<b>GENERAL INFORMATION</b>				
1	Name of the Institution				
2	Working under the fold of	KVIC	KVIB		
3	Full address with STD code and Phone No.				
4	Name of Chairman/ Secretary With Phone/ Mobile No.				
5	Activities under going				
6	Khadi Certificate No. and date of validity.				
7	Category (A+,A,B,C,or D)				
8	Period since working (Establishment year)				
9	Name of founder of the institution				
10	How many production centers are running?				
11	No. of Sales centers established.				
12	What types of equipments/implements are available for work				
13	Area of operation (Block,Distt., State, Country)				
<b>PERFORMANCE</b>					
14	Achievement during last 3 years	Details	2015-16	2016-17	2017-18
		Production value (Yarn)			
		Production Value (cloth)			
		Sale value of cloth			
		Employment (No.)			
		Wage paid (Rs.)			
		Profit/Loss			
15	Whether export any item	Yes	No		
16	If yes, give details		2015-16	2016-17	2017-18
		Products name			
		Export value (Rs. in lakhs)			

		Countries name			
17	Whether involved with Govt. Supply.	Yes	No		
18	If yes, details of 3 years		2014-15	2015-16	2016-17
		Products name			
		Value of supply			
		Name of Deptt.			
19	Whether any product has been brought under BIS, ISO, Ag Mark certification, if yes, give details				
20	Quality control measures such as in house laboratory etc.				
21	Pollution control measures				
22	Safety measures taken				
23	Energy conservation measures				
24	Availability of cashless facilities at sales bhandars				
25	Employees welfare measures such as AWFT, Bonus, Reward scheme, JBY				
26	Whether any training provided to staff to upgrade their skill				
22	Whether institutions has innovated any new item, new equipment, new design etc. If yes please give details				
23	Customers satisfaction and feedback report				
24	No. of artisans with Aadhar linked accounts				
25	Plan for creation of more employment, new products, new market or any new thing for promotion of KVI activities.				
26	Whether institution has got so far any award from KVIC and or any other organization for KVI activities.				
27	Any other facilities available and achievements/details related to product/unit for consideration of the award (attach separate sheet)				

Date:

Signature of Secretary/Chairman  
Name: \_\_\_\_\_

**Stamp**

**DECLARATION BY SECRETARY/CHAIRMAN OF INSTITUTION**

I ( \_\_\_\_\_ ), Secretary/ Chairman of  
(Name)  
\_\_\_\_\_ who is a  
(Name of institution)  
bonafied Institution working under the fold of  
\_\_\_\_\_ declare that the institution  
(Name of KVIC/KVIB)  
is not involved in any un constitutional work and also it is not a defaulter  
in any scheme of KVIC/KVIB.



(Signature of Secretary/ Chairman)  
Name \_\_\_\_\_

To be attested by recommending authority

Date:  
Place:

**RECOMMENDATION OF STATE/DIV.OFFICE/KVI BOARD**

It is certified that \_\_\_\_\_  
is a bonafied institution under the fold of KVIC/KVIB and the declaration  
made by the Secretary/ Chairman of this institution stated as above is  
correct as per my best knowledge and office records. I recommend the  
name of this institution for National Award-2015-16 of KVIC.

Signature of State Div./ Director of KVIC/CEO,KVI Board:

Name of Officer I/c \_\_\_\_\_  
Name of Office \_\_\_\_\_

Stamp

**RECOMMENDATION OF ZONAL DY. CEO OF KVIC**

Signature of Zonal Dy.CEO/Officer I/c \_\_\_\_\_

Name of Zonal Dy.CEO/Officer I/c \_\_\_\_\_

Name of Zone Office \_\_\_\_\_

Date:  
Place:

## FORMAT-3

### FORMAT FOR RECOMMENDING THE NAME OF V.I./REGP/PMEGP UNIT FOR NATIONAL AWARD FOR THE YEAR 2015-16/2016-17/2017-18

Sr.	<b>GENERAL INFORMATION</b>				
1.	Name of the Unit				
2	Full address with STD code and Phone No.				
3	Type of unit	V.I.	REGP	PMEGP	
4	Working under the fold of	KVIC		KVIB	
5	Name of Bank branch from where the unit has been financed				
6	Year of finance & amount				
7	Name of entrepreneur/ Contact person With Phone/ Mobile No.				
8	Age of entrepreneur				
9	Education of entrepreneur				
10	Category	General	OBC	SC/ST	
11	Name of specialized products producing				
12	Period since working (Establishment year)				
13	Types of equipments/ implements used for work				
14	Area of operation (Block, Dist, State, Country)				
15	Whether any Award from KVIC or any other organization has been received earlier? Give details and year of Award.				
<b>PERFORMANCE</b>					
1	Achievement during last 3 years	<b>Details</b>	2014-15	2015-16	2016-17
		Production value (Yarn)			
		Production Value (cloth)			
		Sale value of cloth			
		Employment (No.)			
		Wage earned (Rs.)			
		Bank Finance			

		Loan repayment position			
		Whether physically verified (working/Not working)			
2	Whether export any item	Yes	No		
3	If yes, give details		2014-15	2015-16	2016-17
		Products name			
		Export value (Rs. in lakhs)			
		Countries name			
4	Whether involved with Govt. Supply.	Yes	No		
5	If yes, details of 3 years	Details	2014-15	2015-16	2016-17
		Products name			
		Value of supply			
		Name of Deptt.			
6	Quality control measures such as in house laboratory etc.				
7	Pollution control measures				
8	Safety measures taken				
9	Energy conservation measures				
10	Employees welfare measures such as ESI, CPF, Bonus, Reward scheme				
11	Whether any training provided to staff to upgrade their skill				
12	Whether any product has been brought under BIS, ISO, Ag Mark certification, if yes please give details				
13	Whether unit has innovated any new item, new equipment, new product etc. If yes please give details				
	Plan for creation of more employment, new products, new market or any new thing for promotion of KVI activities.				
	Other basic amenities/facilities at work place and any achievements/details related to product/unit for consideration of the award (attach separate sheet)				

Signature of Entrepreneur/ Manager

Name: \_\_\_\_\_

**Stamp**

**DECLARATION BY ENTREPRENEUR OF UNIT**

I ( \_\_\_\_\_(Name)\_\_\_\_\_ ), entrepreneur/  
Manager of \_\_\_\_\_  
(Name of V.I./REGP/PMEGP Unit)  
Who is a bonafied unit working under the fold of \_\_\_\_\_  
(Name of KVIC/KVIB)  
declare that this unit is not involve in any un constitutional work and  
also it is not defaulter in the scheme of KVIC/KVIB.



(Signature of Entrepreneur/Manager)  
Name \_\_\_\_\_

To be attested by Recommending Authority

Date:  
Place:

**RECOMMENDATION OF STATE/DIV.OFFICE/KVI BOARD**

It is certified that \_\_\_\_\_  
is a bonafied institution under the fold of KVIC/KVIB and the declaration  
made by the Entrepreneur/Manager of this unit stated as above is  
correct as per my best knowledge and office records. I recommend the  
name of this unit for National Award-2015-16/2016-17/2017-18 of KVIC.

Signature of State Div./ Director of KVIC/CEO,KVI Board:

Name of Officer I/c \_\_\_\_\_

Name of Office \_\_\_\_\_

Stamp

**RECOMMENDATION OF ZONAL DY. CEO OF KVIC**

Signature of Zonal Dy.CEO/Officer I/c\_\_\_\_\_

Name of Zonal Dy.CEO/Officer I/c\_\_\_\_\_

Name of Zone Office \_\_\_\_\_

Date:  
Place:

**FORMAT FOR RECOMMENDING THE NAME OF DSO, CSP, INDUSTRY SPECIFIC TRADING UNITS (BEE-KEEPING, HMPI, KHADI, LEATHER Etc.) OF KVIC/KVIB FOR NATIONAL AWARD-2015-16/2016-17/2017-18**

Sr.	<b>GENERAL INFORMATION</b>				
1.	Name of the Deptt. Centre				
2.	Working under the fold of	KVIC	KVIB		
3.	Full address with STD code and Phone No.				
4.	Name of Directorate/Deptt. under which it is working				
5.	Name of Director/ Manager/ In charge With Phone/Mobile No.				
6.	Period of posting ,Since				
8.	Activities under taken in the Centre				
9.	Period since working of the centre(Establishment year)				
10.	Name of branches of the Centre (if any)				
11.	What types of equipments/implements are used in work				
12.	No. of employees/workers posted at Centre				
13.	Area of operation (Block, Dist, State, Country)				
	<b>PERFORMANCE</b>				
14.	Target and Achievement during last 3 years	details	2014-15	2015-16	2016-17
		Sales/Turnover			
15.	Profit /Loss during 3 years (Rs. in lakh)	2014-15		2015-16	2016-17
16.	Whether involved with Govt. Supply.	Yes		No	
17	If yes, give details	2014-15		2015-16	2016-17
		Products name			
		Export value (Rs. in lakhs)			
		Countries name			
18.	Whether the centre has been brought under BIS,ISO , Ag Mark certification,				

	if yes please give details	
19.	Whether the Centre has innovated any new item, new equipment, new design etc. If yes please give details.	
20.	Further Plan for more employment, new products, new market or any new thing for promotion of KVI activities.	
21.	Sales promotion scheme	
22.	New Bulk customer developed	
23.	Computerized and barcode system in operation and air conditioned showroom	
24.	Imitative for disposal of shop soiled and old stock	
22.	Whether the centre has got so far any award from KVIC and or any other organization for KVI activities.	
	Other basic amenities/facilities at work place and any other achievements/details related to product/unit for consideration of the award (attach separate sheet)	

Place:  
Date:

Signature of Director/Manager of the centre  
Name: \_\_\_\_\_

**Stamp**



**To be attested by Head of the Dept/Directorate  
RECOMMENDATION of Zonal Dy. CEO of KVIC**

It is certified that \_\_\_\_\_ is a Dept. Centre of KVIC/KVIB working under the programme of \_\_\_\_\_ and the details given by the Director/Manager/I/c of this centre stated as above is correct as per my best knowledge. I recommend the name of this Centre for National Award-2015-16 of KVIC.

Signature of Dy. CEO KVIC

Name of Officer I/c \_\_\_\_\_

Date:

Place:

Stamp



**FORMAT FOR RECOMMENDING THE NAME OF INSTITUTIONAL/  
DEPARTMENTAL TRAINING CENTRE UNDER KVIC/KVIB FOR NATIONAL  
AWARD FOR THE YEAR 2015-16/2016-17/2017-18**

Sr	<b>GENERAL INFORMATION</b>			
1.	Name of the Centre			
2.	Working under the fold of	KVIC	KVIB	
3.	Full address with STD code and Phone No.			
4.	Name of Manager/ In charge With Phone/ Mobile No.			
5.	Period of posting ,Since			
6.	Name & address of the institution under which it is working.			
7.	Name of Secretary/ Chairman of the Institution with Phone/Mobile No.			
8.	Activities under taken in the Centre			
9.	Period since working of the centre (Establishment year)			
10.	Name of branches of the Centre (if any)			
11.	What types of equipments /implements are used in work			
12.	No. of employees/workers posted at Centre			
13.	Area of operation (Block, Distt., State, Country)			
	<b>PERFORMANCE OF CENTRE</b>			
14.	Target and Achievement during last 3 years	2014-15	2015-16	2016-17
15.	Profit /Loss during last 3 years (Rs. in lakh)	2014-15	2015-16	2016-17
16.	Whether involved with Govt. Supply.	Yes		No
17	If yes, give details	2014-15	2015-16	2016-17

		Products name			
		Export value (Rs. in lakhs)			
		Countries name			
18.	Whether the centre has been brought under BIS,ISO , Ag Mark certification, if yes please give details				
19	No. of convergence establish with Govt.Deptt/Ministries/ Corporates for sponsored Training programme				
	Established linkages for trainees with PMEGP scheme				
	From when Computerized system in operation				
	From when Class room facilities with audio visual facilities				
19.	Whether the Centre has innovated any new item, new equipment, new design etc. If yes please give details.				
20.	Further Plan for more employment, new products, new market or any new thing for promotion of KVI activities.				
21.	Whether the centre has got so far any award from KVIC and or any other organization for KVI activities.				
22.	Other basic amenities/facilities at work place and any other achievements/details related to product/unit for consideration of the award (attach separate sheet)				

Signature of Director (I/c)/Principal of the centre  
Name: \_\_\_\_\_

Place:

Date:

**Stamp**

**DECLARATION BY SECRETARY/CHAIRMAN/PRINCIPAL OF INSTITUTION**

I ( \_\_\_\_\_ ), Secretary/  
Chairman of \_\_\_\_\_  
Name

declare that this is a certified centre of \_\_\_\_\_ and  
(Name of Institution)  
Institution is working under the fold of \_\_\_\_\_  
(Name of KVIC/KVIB)

I also declare that the institution is not involved in any Un constitutional work and it is not defaulter in any scheme of KVIC/KVIB.

Photo  
of  
Secretary/  
Chairman/  
Principal

(Signature of Secretary/ Chairman/Principal)  
Name \_\_\_\_\_

To be attested by recommending authority

Date:

Place:

**RECOMMENDATION OF ZONAL DY. CEO OF KVIC**

It is certified that \_\_\_\_\_ is a Dept./ Institutional Training Centre of KVIC/KVIB working under the programme of \_\_\_\_\_ and the details given by the Director/Manager/I/c/Principal of this centre stated as above is correct as per my best knowledge. I recommend the name of this Centre for National Award-2016-17/2017-18 of KVIC.

Signature of Dy. CEO KVIC

Name of Officer I/c \_\_\_\_\_

Date:

Place:

Stamp

## FORMAT-6

### FORMAT FOR RECOMMENDING THE NAME OF BEST EXPORT ORIENTED UNIT/EPC (KHADI INSTITUTION/VI UNIT AND REGP/PMEGP UNIT) FOR NATIONAL AWARD-2015-16/2016-17/2017-18

Sr.	<b>GENERAL INFORMATION</b>				
1.	Name of the Institution				
2.	Working under the fold of	KVIC	KVIB	DIC	
3.	Whether existing/new EPC Member of KVIC	Existing	New		
		Valid upto _____ (Year)			
4.	Full address with STD code and Phone No.				
5.	Name of Chairman/ Secretary /entrepreneur/ contact person. With Phone/ Mobile No.				
6.	Khadi Certificate No. and date of validity (for Khadi institution).				
7.	Name of Bank branch from where the unit has been financed (for REGP/PMEGP Units)				
8.	Category (A+,A,B,C,or D) in case of khadi institutions				
9.	Period since working (Establishment year)				
10.	Name of founder of the institution				
<b>PERFORMANCE</b>					
11	Details of export	Details	2014-15	2015-16	2016-17
		Products name			
		Export value (Rs. in lakh)			
		Countries name			
<b>Please indicate each product and country exported to, separately.</b>					
12	Whether direct/indirect export with IEC Code No.				
13	Whether any product has been brought under BIS,ISO , Ag Mark certification, if yes please give details				

14	Whether institutions has innovated any new item, new equipment, new design etc. which has been in demand abroad. If yes please give details	
15	Plan for creation of new products, new export market or any new thing for promotion of KVI activities internationally.	
16	Whether institution has got so far any award from KVIC and or any other organization for KVI export activities.	
17	Other basic amenities/facilities at work place and any other achievements/details related to product/unit for consideration of the award (attach separate sheet)	

Signature of Secretary/Chairman

Date-

Name: \_\_\_\_\_

**Stamp**

**DECLARATION BY SECRETARY/CHAIRMAN OF INSTITUTION:-**

I ( \_\_\_\_\_ ), Secretary/ Chairman of  
(Name)  
\_\_\_\_\_ who is a  
(Name of institution)  
bonafied Institution working under the fold of  
\_\_\_\_\_ declare that the institution  
(Name of KVIC/KVIB)  
is not involved in any un constitutional work and also it is not a defaulter  
in any scheme of KVIC/KVIB.



(Signature of Secretary/ Chairman)  
Name \_\_\_\_\_

To be attested by recommending authority  
Date:  
Place:

**RECOMMENDATION OF STATE/DIV.OFFICE/KVI BOARD**

It is certified that \_\_\_\_\_  
is a bonafied institution under the fold of KVIC/KVIB and the declaration  
made by the Secretary/ Chairman of this institution stated as above is  
correct as per my best knowledge and office records. I recommend the  
name of this institution for National Award-2016-17/2017-18 of KVIC.

Signature of State Div./ Director of KVIC/CEO,KVI Board:  
Name of Officer I/c. \_\_\_\_\_

Stamp

**RECOMMENDATION OF ZONAL DY. CEO OF KVIC**

Signature of Zonal Dy.CEO/Officer I/c \_\_\_\_\_  
Name of Zonal Dy.CEO/Officer I/c \_\_\_\_\_  
Name of Zone Office \_\_\_\_\_

Date:  
Place:

**FORMAT FOR RECOMMENDING THE NAME OF BEST KVI BOARD  
(NE & Non-NE) FOR NATIONAL AWARD FOR THE YEAR  
2015-16/2016- 17/2017-18**

Sr.	<b>GENERAL INFORMATION</b>				
1.	Name of the State/U.T. KVIB				
2.	Complete address with phone no, fax no. and e-mail id				
3.	Date	Constitution of the Board			
		Reconstitution of the Board			
4.	Total Members of the Board	No. of official Members			
		No. of Non-official Members			
5	<b>Information in respect of REGP/PMEGP Scheme target and achievement as on 2015-16/2016-17/2017-18</b>				
	Particulars	No. of project forwarded to the banks	No. of projects sanctioned by Banks	Total amount of loan released by bank	M.M released by Board
	No. of individual				
	No. of institutions				
	No. of Co-op Soc.				
	B.F. Linkages (please specify below)				
i					
ii					
iii					
	<b>Total</b>				
6.	<b>Target and performance of the Board (For the year 2015-16/2016-17/2017-18)</b>				
Sr	Particular	KHADI	VI	Total	
i	Production				
ii	Sales				
iii	Total Employment				
	Full Time				
	Part Time				
iv	Share of Employment				
	SC				
	ST				

	Women			
v	Total Earning			
	Part Time			
	Full Time			
<b>Note: Board is requested to give reasons in case the performance is lower compared to the year 2015-16/2016-17/2017-18</b>				
7	Total number of villages in the State (In Nos.)			
8	Number of Villages covered under KVI Programme in the state			
9	<b>Details of fiscal concession given by the State Government</b>			
i	Purchase Tax			
ii	Sales Tax/VAT			
iii	Octroi			
iv	Stamp Duty			
v	Rebate in Khadi			
vi	Any other concession like purchase preference/price preference/reservation etc. given by the State Govt. kindly obtain a copy of the latest order in respect of each case and forward to this office along-with the report.			
10	<b>Details of Assistance/Grants received for establishment expenditure during the last 3 years (Rs. in lakhs)</b>			
Sr.	Particulars	2015-16	2016-17	2017-18
a	Assistance/Grants received from State Govt.			
b	Establishment expenditure incurred			
11	<b>Special programme taken up during the year 2016-17 (give a brief note)</b>			
a.	Marketing Promotion			
b.	Exhibition organized			
c.	Any other			
12	Details of exports (Please attach separate sheet	Items Exported and value	Name of the Country	
13	Publicity No. of PEP organized by Board			
14	<b>Other Programmes (Please attach brief note on the following)</b>			
a.	PRODIP			
b.	SFURTI			



c.	RISC	
d.	RICS	
e.	Training Centre	
f.	Laboratory/Processing Unit	
15	Any other achievement/details for consideration of the award (in a separate sheet)	

Signature of Chairman/CEO

Date:

Name: \_\_\_\_\_

**Stamp**

**Recommendation of Zonal Dy. CEO of KVIC:**

Signature of Zonal Dy.CEO/Officer I/c \_\_\_\_\_

Name of Zonal Dy.CEO/Officer I/c \_\_\_\_\_

Name of Zone Office \_\_\_\_\_

Date:

Place:

- (i) Applications/entries shall be submitted in the formats along with documents as prescribed in the Guidelines. Awards shall be decided based on the applications received against this notification.
- (ii) Application can be submitted online also, along with scanned copies of the required documents. However, online applications have to be followed by submission of the application in hard copy. Application in any one of the mode need be received within the prescribed time.
- (iii) All export/sales figures should be supported by audited statement of accounts or certificate from a Chartered Accountant. In the case of Cooperative Societies/Government bodies, statement of accounts as approved by the General Body or Board of Directors will also be accepted.
- (iv) Official Technical Committee: An Official Technical Committee consisting of the following will scrutinize the application with reference to the eligibility for each category of awards and make their recommendations to the jury of Awards.  
Wherever necessary, the Working Committee constituted to recommend award shall undertake field visit and the applicant shall extend all facilities for the inspection of Units to assess performance. The Working Committee may also outsource experts from the relevant fields to assist as and when required.
- (v) If found necessary, the Working Committee shall constitute sub-committees with or without experts for deciding awards.
- (vi) If required by the Working Committee or Policy Committee, the applicants should demonstrate the functioning of the machinery/production process for which the award is claimed, at the premises of the Unit at their own cost or if approved by the Committee at the premises preferred by the Applicant.
- (vii) There shall be no bar on the Winner to receive more than one Award during the same year or in succession.
- (viii) Separate applications along with supporting documents have to be submitted for applying for Awards in different categories included in the separate forms. However, one application can use one single application for applying for different Awards falling within the same category of Awards. In such cases, the applicant should necessarily fill the background data and performance data and the different categories of awards according to his/her choice, scoring off the categories of awards which he/she does not prefer to apply.
- (ix) Complete applications should reach to the respective State Director along with necessary supporting documents on or before the stipulated date and time
- (x) Incomplete applications, applications not accompanied with documentary evidences as required under the guidelines and the applications received late/after due date will be summarily rejected.
- (xi) In case any of the Award Winners denies the award after announcement/absent himself/herself from the Award function without intimation or furnishing convincing reasons, the applicant shall not be considered for any of the Awards in future.
- (xii) The Awards will be granted in the form of Trophies, Medals, Certificates, cash etc.
- (xiii) The Award Winner shall be provided with to and fro transportation charges including airfare in economic class/train fare in 3 Tier A/C, Bus fare in public transportation system as per actual along with accommodation charges for the limited period as decided by the Policy Committee to facilitate their stay at the venue where the Award function is held.

(xiv) The decision of the Policy Committee of the Award with regard to the eligibility for the Awards, number of Awards etc. shall be final.