**Annexure-I**

APPLICATION FORM

(All columns should be filled up)

|  |  |
| --- | --- |
| 1. | Name of the Applicant Organization. |
| 2. | Complete address with pin code, phone number, fax number and email ID. |
| 3. | Name, Phone No., Mobile No. of the contact person. |
| 4. | Registration number and date of registration and Act (Companies Act, Societies Act, etc.) under which the Organization is registered. |
| 5. | Number of registered members of the applicant organization (membership). |
| 6. | Brief about the applicant organization and what it does for MSME sector (About 200 words). |
| 7. | Name of the proposed event, duration, dates & venue. |
| 8. | Brief description of the proposed event and objective to attend the event (About 200 words). |

|  |  |
| --- | --- |
| 9. | Name of International Events participated in the last 3 years under IC Scheme of the Ministry. |
| 10. | Brief about what benefits the member MSMEs of the Organization had drawn by participating in the previous event under International Cooperation Scheme (200 words). |

Documents to be enclosed:

1. Copy of Registration Certificate of the applicant organization.
2. Copy of Memorandum/ Bye-laws of Association.
3. Copies of Audited Balance Sheet, Profit & Loss Account or Income & Expenditure Account of the applicant organization for the last 03 financial years.

I hereby declare that the above information is true and correct in all respect.

Date……………………

Place…………………...

Signature of the authorised signatory Name……………………………….

Designation…………………………

Stamp of the Applicant Organization:

**Annexure-II**

Tentative list of delegation visiting/ participating in International Exhibition abroad

Only those MSME units may be selected to include in the delegation which have the products manufactured/services rendered matching with the event profile.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl.No. | Name of the Participating Office Bearer and Entrepreneurs | Name and address of the MSME Unit | Mobile phone No. and Landline phone No. | Udyog Aadhar No. | Whether Manufacturer or Service Provider | Name of Products being manufactured/ Services rendered. |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

It is certified that the above mentioned units are registered and having Udyog Aadhaar Registration certificate.

Signature of the authorised signatory Name:

Designation:

Seal of the Applicant Organization:

Date:……………………

Place:…………………...

**Annexure-III**

Score Card for selection of MSMEs for participation in International Exhibition/ Fair (Total Score – 65 Points)

# Name of MSME Unit & UAN No.…………………………………………………………………

|  |  |  |  |
| --- | --- | --- | --- |
| **Sl.****No.** | **Subject** | **Scoring methodology** | **Points allocation****(to be filled up by MSME unit or applicant organization)** |
| 1. | Frequency of participation of a Unit in a trade fair during thelast 5 financial years. | First time participation – 10 Second time participation – 02 Third time participation – 0 |  |
| 2. | Proprietor of enterprise | Woman belonging to SC/ST – 10 SC/ST – 09General – 08 |  |
| 3. | Location of unit | NER region – 05Other – 04 |  |
| 4. | Remote location of unit | Located in rural area – 10 Located in city – 08Located in metropolitan city – 06 |  |
| 5. | Quality of productsmanufactured | ISO certified – 05Non-ISO certified – 03 |  |
| 6. | Innovative / patentedproduct/technology | Patented – 05Non-patented – 04 |  |
| 7. | Category of enterprise | Micro – 10Small – 08 |  |
| 8. | Objective of unit for theparticipation in a trade fair | B2B engagements/ opportunities/ meetings – 10Retail sale of products – 05 |  |
|  | **Total:** | **---** |  |

This is to certify that the score card details given above are correct and nothing has been concealed.

(Signature of authorized signatory) Name……………………………..

Designation………………………

Date:…………………

**Annexure –IV**

Tentative list of Foreign Speakers/ Experts/ Resource Persons participating in International Conference/ summit/ workshop/ seminar in India

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl.No. | Name of the participating Foreign Speakers/ Experts/ Resource Persons | Name of Organization with complete address of Foreign Speakers/ Experts/ Resource Persons | Mobile No., Telephone No. | Field in which the foreign speaker/ expert/ Resource Persons specializes |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

Date:……………………

Place:…………………...

Signature of the authorised signatory Name:

Designation:

Seal of the Applicant Organization:

**Annexure -V**

Budget Estimate

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sl.No. | Item | No. of Persons (including Office Bearer) proposed to participate in the event and No. of Stalls (Booths) to be put up. | Estimated expenditure per Person and Stall | Total Estimated expenditure (in Rs.) | Assistance sought under the IC Scheme(in Rs.) |
| 1. | Air fare |  |  |  |  |
| 2. | Duty Allowance(for Office Bearer only) |  |  |  |  |
| 3. | Space Rent (Stall Rent) (for Entrepreneurs only) |  |  |  |  |
| 4. | Freight charges(for participation only) |  |  |  |  |
| 5. | Advertisement and publicity charges(for participation only) |  |  |  |  |
| 6. | Entry/ registration fee (for participation only) |  |  |  |  |
|  | Total: |  |  |  |  |

Date:……………………

Place:…………………...

Signature of the authorised signatory Name:

Designation:

Stamp of the Applicant Organization:

**Annexure-VI**

CLAIM FORM

|  |  |
| --- | --- |
| 1 | Name of the Applicant Organization. |
| 2 | Complete address, Phone, Fax, E-mail. |
| 3 | Ref. number and date of Ministry of MSME’s in-principle approval letter. |
| 4 | Name of event participated along with duration, date and venue. |
| 5 | Feedback report about the event attended (About 200 words). |

# 6. Claim details (Statement of Account):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl.No. | Items | No. of Persons/Stalls | Actual Expenditure(in Rs.) | Amount Claimed(in Rs.) |
| 1. | Air fare |  |  |  |
| 2. | Duty Allowance(for Office Bearer only) |  |  |  |
| 3. | Space Rent (Stall Rent) (for Entrepreneurs only) |  |  |  |
| 4. | Freight charges(for participation only) |  |  |  |
| 5. | Advertisement and publicity charges (for participation only) |  |  |  |
| 6. | Entry/ registration fee (for participation only) |  |  |  |
|  | Total: |  |  |  |

1. I hereby certify that the above information is correct and is based on the actual expenditure incurred in organising the event.
2. It is also certified that the air-tickets for the delegates were purchased at the cheapest available economy rates.
3. It is also certified that the delegates travelled through the shortest route.

Signature of the authorised signatory Name:

Designation:

Stamp of the Applicant Organization:

Date:……………………

Place:…………………...

CERTIFICATE OF CHARTERED ACCOUNTANT

I have verified the above information from the books of accounts, bills, vouchers, etc. and certify it to be correct.

Date………………

Signature of Chartered Accountant Membership No.

Stamp

Documents to be enclosed with the claim form:

1. Copy of Udyog Aadhar Registration certificate.
2. Copy of e-ticket complete in all respect with fare information on e-ticket itself for air travel.
3. Original Boarding Passes.
4. Original Invoice/Bills along with Receipt of Paymentfor claiming stall charges, freight charges, advertisement & publicity charges, entry/registration fee.
5. Unique ID of Organization as registered in PFMS.
6. Unique ID of Organization as registered in NGO Darpan portal of Niti Aayog (for NGOs only).
7. Copy of PAN Card of the Association.
8. Copy of TAN Number, if any.

Final List of Participants for whom the claim is sought

**Annexure -VII**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sl.No. | Name of the Office Bearer and Entrepreneurs who attended the event. | Name of MSME unit with complete Address, e-mail ID | Mobile phone No. and Landline phone No. | Udyog Aadhar No. | Category (Whether NER/SC/ST) |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 11 |  |  |  |  |  |
| 12 |  |  |  |  |  |
| 13 |  |  |  |  |  |
| 14 |  |  |  |  |  |
| 15 |  |  |  |  |  |

* 1. It is certified that the above mentioned units are registered and have Udyog Aadhaar Registration Certificate.
	2. It is also certified that the above mentioned delegates actually travelled/attended the event.

Date:……………………

Place:…………………...

Signature of the authorised signatory Name:

Designation:

Stamp of the Applicant Organization:

**Annexure-VIII**

MANDATE FORM

Electronic Clearing Service (Credit Clearing)/Real Time Gross Settlement (RTGS) facility for receiving payments.

1. **Details of Accounts Holders:-**

|  |  |
| --- | --- |
| Name of Account Holder |  |
| Complete Contact Address |  |
| Telephone Number/Fax/E-mail |  |

1. **Bank Account Details:-**

|  |  |
| --- | --- |
| Bank Name |  |
| Branch Name with Complete Address, Telephone No. and E-mail |  |
| Whether the Branch is computerized? |  |
| Whether the Branch is RTGS enabled? If yes then what is the Branch’s IFSC Code |  |
| Is the Branch also NEFT enabled? |  |
| Type of Bank Account (SB/Current/Cash Credit) |  |
| Complete Bank Account No. (Latest) |  |
| MICR Code of Bank |  |

Date of effect:

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information I would not hold the use Institution responsible. I have read the option invitation letter and agree to discharge responsibility expected of me as a participant under the Scheme.

Signature of Customer

Date:

Certified that the particulars furnished above are correct as per our records.

(Bank’s Stamp) Date:

Signature of Customer

1. Please attach a photocopy of cheque along with the verification from the bank.
2. In case you Bank Branch is presently not “RTGS enabled”, then upon its upgradation to “RTGS Enabled” branch, please submit the information in the above proforma to the Department as earliest.

**Annexure-IX**

**On the letter head of the Association/Organization**

CERTIFICATE

This is to certify that no Grants-in-Aid for the purpose of activities as approved vide sanction letter No…………………………….… dated……………………..…….. of Ministry of MSME has been applied for or obtained from any other Ministry or Department of Government of India or any other State Government or Government Institute/Agency.

Signature of the authorized signatory Name……………………………….

Stamp of Association/Organization

**Annexure-X**

PRE-RECEIPT

(To be submitted on Letter-head of Association/Organization)

Received a sum of Rs……………………….…

(Rupees )

as financial assistance on reimbursement basis under International Cooperation (IC) Scheme as approved by Ministry of MSME vide sanction letter No……………………………………………..

dated……………………

Revenue Stamp Signature

Name…………………………………..

Designation…………………………....

Stamp of the Association/ Organization

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