



## Swabhimaan Centre PROJECT UPLOAD

### DETAILS OF Point

(The person filling the form will be considered as the primary contact.)

Select your identity

Rotarian     Inner Wheel Member     Rotaractor

1. RI / IW District \_\_\_\_\_ 2. Name of Club \_\_\_\_\_

3. Name : \_\_\_\_\_ 4. Designation : \_\_\_\_\_

5. Phone Number \_\_\_\_\_ 6. E-mail id \_\_\_\_\_

7. City / Town/ Village \_\_\_\_\_ 8. State : \_\_\_\_\_ 9. PIN \_\_\_\_\_

### Project Information Section

No. of clubs involved in project implementation: \_\_\_\_\_ ( W.N. – As many numbers typed, that many rows would open up. Serial no. will be auto filled)

| Sl. No. | Club Name |
|---------|-----------|
|         |           |

### Centre Details

1. No. of Adult Literacy Centres: \_\_\_\_\_

[Website Note (W.N.): As many number of centres typed, that many rows would open. Serial no. will be auto filled]

| Sl No | Centre Id (W.N. auto generated) | Centre Name | Address | No. of Adult Learners | Volunteer Teacher/s name | Volunteer Teacher/s phone number | Language of Teaching | Start Date of Coaching | End Date of Coaching | Class Time |
|-------|---------------------------------|-------------|---------|-----------------------|--------------------------|----------------------------------|----------------------|------------------------|----------------------|------------|
|       |                                 |             |         |                       |                          |                                  |                      |                        |                      |            |
|       |                                 |             |         |                       |                          |                                  |                      |                        |                      |            |

Learner Details:

(Website Note: As many number of adult learners per centre typed under the 4th column, that many rows would open up. Serial No., Centre Name and Centre Id should be auto filled)



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Form No : SC 4.1



Message:- Entering all details of learner is mandatory. The NIOS examination details are to be filled up 1 month before the scheduled exam date. The NIOS certificates must be uploaded within 1 month from the date of issue. Please check Adult Literacy Tab on [www.rotaryteach.org](http://www.rotaryteach.org) for NIOS exam schedule.

## Centre 1

| Centre Name: |                |              |     |                    |   |                 |                                      |                        | Centre Id: |                               |            |   |  |                                    |                                    |
|--------------|----------------|--------------|-----|--------------------|---|-----------------|--------------------------------------|------------------------|------------|-------------------------------|------------|---|--|------------------------------------|------------------------------------|
| Sl. No.      | RIL M Roll No. | Learner Name | Age | Gender (M/F/Trans) | Occupation Type (Drop Down – Full-time/Part-time) | Occupation Type | Category (SC/ST/OBC/Minority/Others) | Whether BPL family Y/N | Address    | Phone Number (optional field) | Photograph | Appearing for NIOS examination (Y/N)                            | NIOS examination date (date/month/year format) | Upload NIOS Exam Registration Form | Upload Picture of NIOS Certificate |
|              |                |              |     |                    |   |                 |                                      |                        |            |                               |            | If the answer is yes, then the next three columns would open up |  |                                    |                                    |

## Centre 2

| Centre Name: |                |              |     |                    |   |                 |                                      |                        | Centre Id: |                               |            |   |  |                                    |                                    |
|--------------|----------------|--------------|-----|--------------------|---|-----------------|--------------------------------------|------------------------|------------|-------------------------------|------------|---|--|------------------------------------|------------------------------------|
| Sl. No.      | RIL M Roll No. | Learner Name | Age | Gender (M/F/Trans) | Occupation Type (Drop Down – Full-time/Part-time) | Occupation Type | Category (SC/ST/OBC/Minority/Others) | Whether BPL family Y/N | Address    | Phone Number (optional field) | Photograph | Appearing for NIOS examination (Y/N)                            | NIOS examination date (date/month/year format) | Upload NIOS Exam Registration Form | Upload Picture of NIOS Certificate |
|              |                |              |     |                    |   |                 |                                      |                        |            |                               |            | If the answer is yes, then the next three columns would open up |  |                                    |                                    |

**Funding Details:** (Website Note: Only when self funded)



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| Rotary/IW/<br>District<br>Fund (INR) | International<br>Funding<br>Collaboration<br>(INR) | Rotary<br>Global<br>Grant<br>Support<br>(INR) | External support through<br>RILM (will not appear<br>for self-funding project) | Corporate<br>Support | Any other<br>agency/ individual<br>funding (INR) | Total<br>(INR) |
|--------------------------------------|--|---|--|----------------------|--|----------------|
|                                      |  |   |  |                      |  |                |
|                                      |  |   |  |                      |  |                |

**Any Other Information You Want To Share** (within 300 words)

SUBMIT