**KERALA STATE BIODIVERSITY BOARD, THIRUVANANTHAPURAM**

**APPLICATION FORM FOR FINANCIAL SUPPORT TO BIODIVERSITY AWARENESS & EXTENSION PROGRAMMES**

|  |  |  |
| --- | --- | --- |
| 1. | Name of applicant |  |
| 2. | Institution/Organisation |  |
| 3. | Address for correspondence |  |
| 4. | Whether the applicant is a Research organisation, Libraries affiliated to the Kerala Library Council, Educational Institution |  |
| 5. | 1. Registration No. 2. PAN of Organisation   (please attach proof of affiliation in case of libraries) |  |
| 6. | Name of the Authority of Research Organisation/ Library/ Educational Institution authorized to receive the grant |  |
|  | Main activities of the Organisation/Institution/Library |  |
|  | Whether received any previous financial assistance from KSBB (Furnish details) |  |
|  | Past experience, if any in conservation of biodiversity |  |
|  | Title of the activity to be undertaken (Awareness & Extension Programmes) |  |
|  | Duration of the activity |  |
|  | Objective of the activity |  |
|  | Expected outcome of the activity |  |
|  | Target audience Students/Government official/Public/Others(specify) |  |
|  | Expected number of Participants |  |
|  | Total estimated cost of the activity. (Detailed budget break up may be furnished duly certified by the competent authority of the institution/ organisation/library) |  |
|  | Contribution from other funding sources, if any |  |
|  | Quantum of financial support sought for from KSBB with breakup duly certified by the competent authority of the institution/organisation/library and signed by the proponent. |  |

Date:

Place: Name and Signature of Convenor

(Office seal)

Name and Signature of Head of the Institution

(Office seal)