

PROFORMA –A FOR 1st HAND HOLDING PAYMENT (50%)

STATUS OF PROJECTS SUBMITTED UNDER AGRI-CLINICS AND AGRI-BUSINESS CENTRE SCHEME -PROFORMA -A (Pending)									
Name of the training institute:									
Training Programme No..... & Duration: (..... to.....)									
S. No.	Name & Address of Applicant	ID No.	Activity proposed	Date of submission of DPR to the Bank	Name of the Bank with Branch address	Project cost (Rs. In Lakhs)	Loan Amount	Postal Acknowledgment ID	Jan Samarth ID
1									
2									
3									
4									
5									

Seal & Signature of the Nodal Officer