No. WCD(SML)-F(24)-1/2012-Awards 5080 Office Of Deputy Commissioner, Shimla, District Shimla (H.P)

To

- . Deputy Director, Secondary / Elementary Education.
- Deputy Director, Language, Art & Culture,
- 3. Deputy Director, Sports & Youth Services
- 4. Chief Medical Officer, DDUZH Shimla
- 5. All Child Dev. Project Officer, Shimla, District Shimla(H.P)

Dated: Shimla February the 2017

Subject: Regarding Mahila Vikas Protsahan Yojna-2013

Sir/Madam,

As you are aware that State Govt. has notified the scheme of "Himachal Pradesh Mahila Vikas Yojna-2013" vide notification No. WLF-F(10)-4/97 dated 26th October,2013. Under the scheme individual and organisation that have done excellent work for promotion of development and empowerment of women in the state during last five years up to 31 December, 2016 in the field of Health, Education, Sports, Social Services and Art and culture in the District are eligible.

You are therefore requested to send the names/Nominations of individual/organisation to the office of District Programme Officer (Women &Child Development) Latawa House Nigam Vihar Shimla-2 on the enclosed format. The awards under the scheme will be presented on women's day, 08th march 2017. You are requested to complete the process as per the time line fixed below:-

Last date for receipt of applications 15.02.2017
Finalisation of recommendation and forwarding to this office 18.02.2017

Enclosure-Format

Yours faithfully,

Deputy Commissioner, Shimla, District Shimla (H.P)

Endst. No. As above Copy to:

Dated: Shimla February the 6th,2017

- 1. Director, Women & Child Development (H.P) for information please.
- 2. District Programme Officer (WCD) for information & nacessary action

Deputy Commissioner, Shimla, District Shimla (H.P)

HIMACHAL PRADESH MAHILA PROTSAHAN YOJNA

FORMAT

- 1. Name and complete address along-with Telephone numbers and e-mail address.
- 2. Area of Award:- Health, Educaion, Sports,

Social Service and Art & Culture.

- 3. Salient Features of work done in the field of Award.
- 4. Year wise contribution (for the last 5 calendar years) (1)

 - (ii)
 - (iii)
 - (iv)
 - (v)
- 5. Name/Address of recommending agencies along-with Reasons for recommendations.