

**Self declaration for organization and authorised signatory and all governing body member/trustee for whom security clearance is sought.**

a) Name & address and registration number of the organisation

\_\_\_\_\_

b) Name and address of authorised signatory & all governing body member/trustee of the organisation  
(Please list)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

c) Is the organisation or any of the governing body member listed above, the subject of any:

- |   |   |        |
|---|---|--------|
| 1. Preventive detention proceeding (PSA/NSA etc.) | : | Yes/No |
| 2. Criminal proceedings                           | : | Yes/No |
| 3. Pending Warrants                               | : | Yes/No |
| 4. Attachment Proceeding                          | : | Yes/No |

If, Yes please provide following details

- |  |   |
|--|---|
| 1. Detention/Case/FIR/Warrant Number               | : |
| 2. Police station and District having jurisdiction | : |
| 3. Section of law                                  | : |
| 4. Name and place of Court                         | : |

The above mentioned details are in respect of both India and any other foreign country.

**Note : The above self declaration is required to be filled and signed by the authorised signatory of the organisation.**

**F01(I&B-BW-P-04)**

**Signature of Authorised Signatory &  
Seal of the Organisation**

Performa for furnishing details of Applicant Organisation and its authorised signatory and all governing body members/trustees etc.

**Details in respect of the Organisation/institutions/Krishi Vigyan Kendra etc.**

Full name of the Organisation/Institution	Date of registration of the Organisation /Institution	Address of Head Office, Regional Offices and Registered Office	Previous Name of the Organisation, if any	FCRA Registration, if any. If yes, Details of foreign contribution received	Power output and Height of the Antenna

**Details in respect of Authorised Signatory and all governing body members/trustees/office bearers etc.**

S. No	Full name of Board of Directors and Key Executives (Wherever applicable)	Present position held with date (since when)	Date of Birth	Parentage		Present and Permanent Address	Nationality	Passport Nos. and date of issue (If any)	Contact Address and Telephone Numbers
				Father	Mother				
1									
2									
3									
4									
5									
6									
7									

*( Use one row for each member. Add more no. of rows, if required)*

**Signature of Authorised Signatory &  
Seal of the Organisation**