

Application form – *Innovative Livelihood Enterprise Promoter of the Year*





Introduction

The **Citi Micro Enterprise Awards** is an endeavor to recognize and honor exemplary micro enterprises whose members and owners have overcome poverty and other socio economic challenges, to successfully build self-sustaining businesses, create employment and contribute meaningfully to their communities. Additionally, the awards will also recognize the significant role played by organizations in nurturing and promoting micro enterprises, through a special award for:

Innovative Livelihoods Enterprise Promoter of the Year

Organizations that have promoted livelihoods and/or set up community enterprises are eligible for this award.

Applications will be reviewed on the basis of the following evaluation criteria:

Livelihoods Strategy and Business Approach – This criteria understands and ascertains the suitability of strategy of the organization when promoting livelihood enterprises such as social, financial, or economic goals.

Management and Governance – This criteria will evaluate the quality of the management and governance structure of the organization and how its policies have strengthened the livelihood enterprises promoted by it.

Innovation- This section seeks information on innovations invented or adapted by the organization for its own operations associated with promoting livelihood enterprises.

Contribution to Community - This criteria aims to understand the nature and extent of engagement that the organization has with communities and enterprises.

Quality Standards and Assurance – This section looks into the organization's creation and adherence to quality standards and how well these are enforced in the promoted livelihood initiatives.

The Best livelihood initiative/livelihood enterprise – As proof of the promoter's performance, the operational and management practices of the best livelihoods/livelihood enterprises promoted by this organization will be reviewed. .

IMPORTANT: Please attach the following documents with the application form:

- a) Balance sheet for the last 3 years
- b) Profit & loss statement for the past 3 years
- c) Registration certificate of the Community Enterprise
- d) Annual Report for the last financial year (if available)

If you are unable to provide any of the above information, please reach out to ACCESS Development Services at 011-26510915, ext-215/216 or mail us at info@cmea.in

Guidelines

To Apply:

- Applications are being sought from Community enterprises, Micro Finance Institutions (MFIs), banks, NGOs promoting livelihoods, individuals, other organizations and individuals working with Community Enterprises.
- o Each nominating organization is allowed to submit a maximum of 5 applications
- Livelihood Enterprise Promoters can apply themselves
- All questions in the application form are mandatory
- o To be considered eligible, the nominated organization should meet the following criterion:
 - √ be a legally registered Indian entity operating in India
 - √ have a minimum of 10 full time, paid employees
 - √ have been set up between April 1, 1996 and March 31, 2010
 - √ have an annual turnover of at least INR 50, 00, 000/-
 - ✓ not be a previous recipient of the Citi Micro Enterprise Awards
 - ✓ not have any pending legal suits against it or its key functionaries
- o The nominated organization or its key functionaries should not be related to any of the award organizers, partners or key functionaries of the nominating organization
- Lobbying or canvassing of any kind on behalf of applicant at any point during the Award shall lead to disqualification
- The organizers do not take responsibility for any disputes related to the prize money given to winners
- The decision of the Governing Council in respect of selection of the winners will be final and binding
- The last date for submitting application form is 31st, August 2012
- o The completed form with the required enclosures should either be emailed to info@cmea.in or sent to the following address:

Citi Micro Enterprise Awards

C/o ACCESS Development Services 28, 1st Floor, Hauz Khas Village New Delhi -110016

Note:-

- ✓ Applications should be filled in English
- ✓ For support in filling the form, contact us at 011- 26510915, ext-215/216
- ✓ Typed applications will be preferred
- ✓ 'Organization' refers to the entity that promotes livelihood enterprises

Application

| A. | Name of the Livelihood Enterprise Promoter: | | | | | | |
|----|---|--------------------|--------|----------------|---------------|--|--|
| В. | Name of the Chief Executive: | | | | | | |
| C. | Registered Address: | | | | | | |
| | City | PIN | Distri | ct | State | | |
| D. | Telephone (STD code)/ Mobile No. | | | | | | |
| Ε. | E-mail ID (if available) | | | | | | |
| F. | Website (if available) | | | | | | |
| G. | Legal status: | | | | | | |
| Н. | Date & year of incorpor | ration: | | | | | |
| I. | Districts/ States in whic | h the organizatior | n oper | ates: | | | |
| | 1. 2. | | | | | | |
| | 3. | | | | | | |
| : | J. The service/product portfolio of the organization:1.2.3.4. | | | | | | |
| K. | K. Awards/Recognitions received : | | | | | | |
| | Name of Award/Recognition | Awarding Age | ncy | Award Category | Year of Award | | |
| | | | | | | | |
| | | | | | | | |

Provide details of each award giving agency and year

SECTION I: Livelihood Promotion Strategy and Business Approach

| currently op | of the top five livel perational : | inood ente | rprises prom | oted by the orga | inization, which a |
|-------------------|---------------------------------------|------------|-------------------|------------------|---|
| ame of livelihood | Date of incorporation of the | | es earned Rs.) | Number of | Awards & recognition received by the enterprise |
| enterprise | livelihood enterprise | 2010-11 | 2011-12 | members | |
| | enterprise | | | | enterprise |
| | | | | | |
| | | | | | |
| C Provide addi | tional information on | - | d enterprises. | - | ion while promoti |

| · · | s evolved by the organization for monitoring the operations of the prom | oted |
|-----|---|------|
| | | |
| | | |
| | | |
| | | |

E. What are the goals of the organization for the next 5 years?

| | Goals | Description | Year of achievement | Outcome (n No.) |
|----|---|-------------|---------------------|--------------------|
| 1. | Financial goal | | | |
| 2. | Economic up-liftment of the targeted beneficiaries | | | |
| 3. | Internal capacities (in terms of human resource development, staff trainings, institutional building etc.,) | | | |
| 4. | Outreach (number of households - targeted through its interventions) | | | |
| 5. | If others (please specify) | | | |

SECTION II: Management and Governance

A. Give details of senior management:

| Name | Designation | Qualification | Role in organization | Number of years of work experience | Gender (M/F) | Years of association with the organization |
|------|-------------|---------------|----------------------|------------------------------------|-----------------|--|
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| В. | Number of board members in the organization: | | | | | |
|----|--|--|--|--|--|--|
| C. | Percentage of women board members: | | | | | |
| D. | No. of external or independent board members: | | | | | |
| E. | How are board members chosen? □ Elected □ Selected by the senior management | | | | | |
| F. | How often does the Board meet in a year? | | | | | |

| G. | Provide | details | of the | Board: |
|----|---------|---------|--------|--------|
| | | | | |

| # | Name of member | Tenure on the Board (in yrs.) | Number of years of work experience | Specific role in the Board (as treasurer/director, advisor, chairman, secretary or any other) |
|----|-------------------|----------------------------------|------------------------------------|--|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

| 4. | | | | | |
|--------|---|--|-------------------------|------------------|--------------------------|
| 5. | | | | | |
| 6. | | | | | |
| 7. | | | | | |
| 8. | | | | | |
| 9. | | | | | |
| 10. | | | | | |
| 11. | | | | | |
| {Pleas | se provide details of all | members even if more | than 11 in number | r) | |
| | | | | | |
| | | | | SECTIO | N III: Innovation |
| A. | | n incorporated any inno ilitate the growth of the | | | |
| В. | If yes, give details of Elaborate on, what the delivery, business gen | e innovation is and the a | reas of its application | on – in operatio | ons, production, service |
| C. | • | of the innovation in te | | | operations, creating |
| | | | | | |

SECTION IV: Contribution to Community

| A. | What is | the c | community that the organization works with: (ple | ase select one or more options as |
|----|------------|---------|--|------------------------------------|
| | applicabl | e): | | |
| | | | Rural {Men \square , women \square , both \square } | |
| | | | Tribal {Men \square , women \square , both \square } | |
| | | | Urban $\{Men \square, women \square, both \square\}$ | |
| | | | If others (please specify) | |
| В. | Nature c | of sup | port provided by the organization on an ongoing b | asis to the livelihood Enterprises |
| | ((please s | elect o | one or more options as applicable) | |
| | | | Advisory support | |
| | | | Financial Support | |
| | | | Technical Support | |
| | | | All of the above along with handholding | |
| | | | Additional (please specify) | |
| C. | Size of th | ne live | lihood enterprises promoted by the organization? (| please select one or more options |
| | as applic | able) | | |
| | | | Micro (investment in plant and machinery does not exce | eed Rs. 25 lakh) |
| | | | Small (in plant and machinery is more than Rs. 25 lakh l | but does not exceed Rs. 5 crore) |
| | | | Medium (in plant and machinery is more than Rs.5 cror | e but does not exceed Rs.10 crore) |
| | | | | |
| | | | SECTION V. Ouglite | · Ctondords and Assurance |
| | | | SECTION V: Quality | y Standards and Assurance |
| | A. Doe: | s the o | organization have any quality certifications? | |
| | | | l Yes | |
| | | _ | l No | |
| | B. Pro | ات مان | etails of such certifications: | |
| | В. РГО | vide d | etans of such certifications. | |
| | # | | Name of certification/trademark/standard | Year it was awarded |
| | 1. | | | |
| | 2. | | | |
| | | | | |
| | 3. | | | |
| | 4. | | | |
| | 5. | | | |

| C. Has the achievement of these quality standards/certification helped the organization? — Yes | |
|--|-------|
| □ No | |
| D. If yes, then explain the benefits in terms of optimum utilization of resources, enhan | ced |
| credibility in the sector, getting better projects for the organization etc. | |
| are constantly are are a constantly greater than the constant of garantees are constantly are an extension of the constant of garantees are constantly are c | |
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| E. Donneller and the control of the | |
| E. Does the organization prescribe quality standards for the livelihood enterprises it | nas |
| promoted? | |
| ☐ Yes | |
| □ No | |
| F. Has the organization conducted any trainings for the livelihood enterprises it has promoted | , on |
| quality management? | |
| ☐ Yes | |
| □ No | |
| Promoted Community Enterpris | se |
| In this section, provide details of the best Community Enterprise that the organization has promoted. | |
| Please highlight the following elements. If a case study is available, please attach a copy | |
| a. Community that the enterprise works with (socio-economic status, gender, age group, poter | ntial |
| skills, number of members, location, etc.) | |
| b. The business model of the enterprise | |
| c. Innovations undertaken with this community enterprise | |
| d. Additional efforts, if any, made to promote financial inclusion, gender equity, | |
| e. The enterprise' goals for next 5 years including its strategy to be sustainable | |
| f. Any awards and recognition that the enterprise has received | |
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Nominating Organization's/ Individual's Details

| 1. | Name of the organization/individual submitting the nomination: |
|----|--|
| 2. | Communication address: |
| 3. | Website: |
| 4. | Telephone number (with STD code): |
| 5. | Email of the contact person: |
| 6. | Year of incorporation (if a nominating organization): |
| 7. | Main operation of the nominating organization: |
| | Mention the type of association with the nominee {Partner agency/promoting organization/donor/advisor/technical service provider/financial institution etc.,}: |
| | <u>'</u> |

DECLARATION

I declare that the information provided is true and to the best of my knowledge. I understand that my application might be rejected at any stage, if any of the information furnished in the form is found to be inaccurate.

Signature and Seal of the organization filling the form

Date

Authorized Signatory