Asha-Kansas City New Project Proposal Template

|  |  |
| --- | --- |
| **Project Name: “Aashayam”** | **Date Received:** |
| **Referred By: Radha Velagapudi** | **11/16/2015** |

|  |  |  |
| --- | --- | --- |
|  | **Project Contact Information** | **Asha Contact** |
| Name | Lakshmi Kumari (Founder and Secretary and Caretaker) | **Radhakrishna Velagapudi** |
| Contact | Ravindra Babu |  |
| Address | H.No: 42-93/2, Plot No. 245, Jawahar Nagar Colony, Moula-Ali, Hyderabad, AP- 500040, India | Asha GKC  P.O. Box 860732  Shawnee, KS 66286 - 0732  USA |
| Phone | 9959244558, 9959225040, 27142025(h) | **+1-913-484-1370** |
| Fax | - Nil- |  |
| E-mail | [s\_ravindra\_babu@yahoo.com](mailto:s_ravindra_babu@yahoo.com) | [**Asha-gkc-core@yahoogroups.com**](mailto:Asha-gkc-core@yahoogroups.com)  **rkvelagapudi@gmail.com** |

#### Part I: Information about your group/organization

**Please feel free to attach any additional sheets and/or information such as brochures, press reports etc.**

|  |
| --- |
| ***1. Name of the group/organization requesting funds.***  Aashayam Parents Association |
| ***2. When was the group established?***  2008 |
| ***3. Briefly describe the motivation for starting this group.***  The aim of the organization is to provide training and income generation activities to eligible Mentally Retarded Children with broad view to create placement facilities for them to obtain long term benefits. |
| ***4. Name the key people running the organization and describe their background***     1. Mrs. Lakshmi Kumari – Founder and President   Lakshmi Kumari has worked with the mobile team of National Institute of Mentally Handicapped and started her voluntary service. In addition to training the disabled children she counsels parents of such children to make them aware of the available opportunities.   1. Mr. Ravindra Babu is the husband of Mrs. Lakshmi Kumari works as General Manager at APSRTC and supports the voluntary organization with administration and communication. |
| ***5. Briefly describe the aims of your group.***    Aashayam was founded with the vision of transforming the lives of children with disabilities and other disadvantaged communities who lack adequate social-economic, educational, welfare and health facilities. |
| ***6. Does your group have any religious or political affiliation? If yes, please describe the type of affiliation and the reason for it.***  There is no religious or political affiliation. |
| ***7. What non education-related community development activities is your group involved in?***  1. Conducts awareness camps to the parents of mentally disabled children.  2. Counsels the parents by visiting the homes of disabled children  3. Conducts medical camps in the slum areas and distributes medicines |
| 8. ***Does your organization have FCRA (Foreign Contribution Regulation Act of 1976) clearance from the Indian government? This is required for you to receive foreign funds. If yes, please provide FCRA details. If no, have you applied for Prior Permission (one time acceptance of foreign funds)? If yes, when was the application submitted?***    FCRA:  Registration number: 368130005  Approval dated 07/29/2015  Name: Aashyam Parents Association  Address: H.No: 42-93/2, Plot No. 245, Jawahar Nagar Colony, Moula-Ali, Hyderabad, AP- 500040, India  Bank information: State Bank of Hyderabad. Account Number: 62057327688  Branch: Moula-Ali, Hyderabad.  IFSC code: SBHY0020096  SWIFT code: SBHYINBB |

#### Part II: Details about your educational project/s

|  |
| --- |
| ***1. List the school/s run by your group, and their locations. If you are requesting funds for only a few of several schools, please specify which one/s***.  Aashayam trains the kids in Mrs. Lakshmi Kumari’s house due to lack of funds to invest in infrastructure facilities. It is a two story house and entire first floor is allocated for the training needs.  The funds are requested for the salaries of specially trained teachers to educate/train the mentally disabled children. |
| ***2. Who owns the school legally? Is it the organization or trustees or an individual. Please provide details.***  Aashayam Parents Association is a registered society under AP Societies registration act. |
| ***3. Location of school/s***  Urban  Rural  Other  Moula-Ali, Hyderabad, Telangana, India. |
| ***4. Specify the type of education provided (e.g. basic literacy, vocational training etc.).***  Basic Literacy and Vocational Training for the mentally handicapped children to attain self sustenance and gainful employment. |
| ***5. Please tell us about your teaching techniques (conventional vs. alternative).***  \* Special education for mentally handicapped. It is alternative method of teaching the children to be self-sufficient and even train them in some specialty areas where the children can find employment. |
| ***6. What is the literacy rate in your local community? Please give a breakdown between boys and girls if possible.***  No statistics available for the literacy rate of mentally handicapped. |
| ***7. Describe the socio-economic background of the children and their parents (e.g. education, occupational). If any of your students are employed, please tell us about that as well.***  Children with mental disabilities. Children are picked from the local neighborhood with disabilities and are trained to help themselves and also to get gainful employment. Preference is given to children from poor families. |
| ***8. What is the admission criteria for the students to join your school? Have you ever turned away students? If so, why? How many children attend your school currently? How many teachers do you have? How many full time students? How many part time teachers? How much is the fees? Is there an admission one time fee?Do you have parent teacher meetings (parent involvement)?***    Lakshmi Kumari identifies the kids with mental disabilities in the neighborhood and motivates the parents to send them for training to Aashayam. Other than being mentally/physically disabled there are no other criteria applied for admission. |
| ***9. In addition to education, does your group provide any other services to the children in your schools (e.g. food, health care, clothing, etc.)?***  Health care. Teja Krishna foundation assigns physicians to examine the children and suggest suitable medication. They also provide funding for medication. |
| ***10. How do you perceive that education will improve the lives of the children in your village?***  Mentally handicapped children can be trained to self sustain and even get employed. Parents that were not aware of the opportunities available for mentally handicapped are now better placed about their children and their potential. |
| ***11. Does your school have:*** Its own building(s): Yes  No Number Number and type of classrooms (e.g. Pukka): 3  **Yes No** **Yes No** **Yes No**  Toilets   Playground   Toys  Chairs & Tables   Blackboard   Library  Drinking water   Electricity   Computers  Laboratory   Teaching aids (e.g. books/slates) |
| ***12. What is the age group of the children currently enrolled in your school(s)?***  Youngest 10 years: Oldest 30 years  [Average Age: 18 yrs.] |
| ***13. How many staff are employed at your schools?*** Full time Teachers – 3, Part time special teachers - 2 Other staff – 3 |
| ***14. Average distance the children travel to attend your school*** : 10 kms – Transportation provided by school.  ***T*** |
| ***15. Please answer this if your school has existed for at least 5 years. How many children have gone through your program in the past five years and what are they doing currently? Please tell us about their future education possibilities***. ***How would you visualize their future employment possibilities?***  N/A |
| *16. Do you help your students with their future education efforts after they have completed school? If so please describe your efforts.*  N/A – Not a conventional school setting. But once the children can sustain on their own, they are trained on skills that can be marketable to gain employment. |
| *17. Do the students who have studies or graduated get involved in the school afterwards and help the next batch?*  NA—the children that are trained in this setting are not capable of training the next batch. |
| ***18. Are there any other schools (Kindergarten/Balwadi****,* ***Elementary school****,* ***High school****)* ***in the area? If so, please list the schools and the range of classes each of them offers.***  N/A. There are many conventional schools for normal children but this society trains only mentally handicapped children. There is no school to meet the needs of mentally handicapped children. |
| ***19. Is your program different from that provided at these schools? Please explain.***  The program is offered only to mentally handicapped children who are not in a position to take care of themselves without assistance. |
| ***20. Why are the children in your school/s not attending government/other schools in the local area***?  Children that attend this school are mentally disabled and are not admitted in government schools. |
| ***21. Do you try to involve the parents of the children in the running of the school (e.g. in setting the syllabus etc.)? Please specify.***  Yes, one of the activities of the program is to spread awareness among parents and involve them. |
| ***22. What are your expansion plans for the future***  Current goal is to provide education/training to the current students by hiring qualified teachers. If sufficient funds are raised, plan is to buy some equipment so that the children can be trained on the equipment. Trained teachers and additional equipment will allow the organization to expand into other areas. |
| ***23. Any additional details you would like to provide to us.***  This is not a conventional education program. Only mentally retarded children especially from economically backward areas are selected to be trained to make them self sufficient and enable them to gain employment. |

***24. If possible, please provide us with the contact information of two individuals from your community (not related to the school) who can describe the impact of your program***.

*Dr. Kakarla Subba Rao: contact ph: 9440115130 email:* [*kakarlasubbarao@yahoo.com*](mailto:kakarlasubbarao@yahoo.com)

*Ravindra K contact ph: 9440237302. email: ravifunin@yahoo.com*

***25. Asha for Education requires reports from its projects every six months to continue funding. Please provide the contact information for the person from your group who will be responsible for these reports.***

|  |  |
| --- | --- |
| Name | Ravindra Babu |
| Address | H.No: 42-93/2, Plot No. 245, Jawahar Nagar Colony, Moula-Ali, Hyderabad, AP, India |
|  |  |
| Phone | 27142025(h) 9959226241(c) |

#### Part III: Financial Details

|  |
| --- |
| ***1. What sources fund your group’s activities at present? List the sources and the current and future funding from each of them. If these funds are meant for a specific part of your group’s activities, please describe those restrictions.***   1. Founders contribution. 2. Individual donors. 3. Asha Funding for Teachers’ salaries, School supplies, school furniture |

***2. Please provide us with details of your projected budget for the next 3 years:***

*Rs 11,00,000/annum – increasing at rate of inflation.*

##### 

***3. Salary expenditure details:***

*Rs 5,34,000/year--Salary for six teachers with Diploma in Mentally Retarded, special BEd.*

*Rs 3,20,400/year for other staff including office assistant, housekeeping, van driver etc*

|  |
| --- |
| ***4. Please provide details of the fixed costs of your school/s for the next three years.***  The majority of the fixed costs are borne by the founders by providing the housing.  Recurring costs like Diesel are included in the funding request  Planning to add equipment for book binding, either through sponsors who would provide the equipment or through individual donations. |

***5. What amount are you requesting from Asha, and for what specific purpose?***

|  |  |  |
| --- | --- | --- |
| Line Item | Amount (INR per annum) | One time / Annual |
| Teacher– Venkat Ramana @8000 | 96000 | Annual |
| Teacher – Shanthi@7000 | 84000 | Annual |
| Teacher – Bhushan @10000 | 120000 | Annual |
| Speech therapy/spl education - part time @2500 | 30000 | Annual |
| Speech therapy/spl education - part time @2000 | 24000 | Annual |
| Admin & Office assistant – Harathi @7000  (Physically disabled) | 84000 | Annual |
| Van Driver to transport students from home@10000 | 120000 | Annual |
| House maintenance – Kamala @2000 | 24000 | Annual |
| Diesel @6000 | 72000 | Annual |
| Payments to disabled students for their work@7700 | 92400 | Annual |
| Teaching material | 75000 | Annual |
| Total | Rs. 8,21,400 | Annual |

#### IMPORTANT: For Asha-GKC Use Only

**To be filled by project steward:**

***1. What parts of the above budget was approved?***

|  |  |  |
| --- | --- | --- |
| Line Item | Amount | One time / Annual |
| All of the above line items | Rs 8,21,400 | Annual |
|  |  |  |
|  |  |  |
|  |  |  |

***2. What is the total amount approved in Indian Rupees and for what time period?***

|  |  |
| --- | --- |
| Year | Amount |
| Jan 2016 to Dec 2016 | Rs 8,21,400 |
|  |  |
|  |  |
|  |  |
|  |  |

Total amount of Rs. 8,21,400 was approved for full year.

|  |
| --- |
| ***3. Please list out the first year’s goals of this funding (ie. what are the metrics by which we will measure the progress of this project? Please try as much as possible to list out objective things that can be measured.)***   1. Teachers’ salaries 2. Maintenance (office, housekeeping, utilities) 3. Transport van driver salary and diesel expense |