GOVERNMENT OF THE PUNJAB
CHILD PROTECTION & WELFARE BUREAU
Angori Bagh Scheme, Shalimar Link Road, Lahore

FORM-A
APPLICATION FORM FOR REGISTRATION OF ORGANIZATION
MANAGING ACCOMMODATION FOR DESTITUTE AND NEGLECTED CHILDREN

Under the Punjab Destitute and Neglected Children Act 2004 (XVIII of 2004), read with the Punjab Destitute and Neglected Children (Registration of Organizations Managing Accommodation) Rules 2019 — Rule 3(1)

Type of Application (tick one)	Application / Portal Reference No. (office use)
☐New Registration (section 20-A & Rule 3) ☐Renewal (Rule 4)	
Previous Registration Certificate (Form-B) No. — renewal only	**Date of expiry of previous certificate — renewal only**

To

The Director General
Child Protection & Welfare Bureau, Government of the Punjab
Angori Bagh Scheme, Shalimar Link Road, Lahore.

I/we hereby submit application for grant of approval by the competent authority to register the organization managing accommodation for Destitute and Neglected Children under the PDNC Act 2004, as per the following particulars:

Instructions and Information for Applicants

1. **Filling in the form:** Write in BLOCK LETTERS or type. Tick (✓) the relevant box. Write "N/A" where an item does not apply. Attach extra sheets if space is insufficient.
2. **Registration Fee (Rule 3):** Rs. 1,000/- to be deposited in the head of account "C-03 Miscellaneous Receipt CO-3859-Collection of Registration/Work Permit Fee". Attach the deposit receipt with this form.
3. **Processing (Rule 3):** The Registering Authority (CP&WB, Punjab) will enquire about the information provided and seek a report from the Deputy Commissioner of the concerned District. On satisfaction it may issue the Registration Certificate on **Form-B**, initially for ONE year.
4. **Rejection and appeal (Rules 3 & 8):** An application may be rejected for reasons recorded in writing. An aggrieved organization may appeal to the Home Secretary, Government of the Punjab within 30 days from the date of communication of the order; his decision shall be final.
5. **Renewal (Rule 4):** Apply thirty days before the date of expiry of registration with a renewal fee of Rs. 500/- deposited in the same head of account. Renewal, if granted, shall be for a further period of one year.
6. **Inspection (Rule 7):** The Registering Authority or its authorized officer (not below BS-17) may inspect the premises and call for records at any time. Failure to provide records may lead to suspension of registration impacting functioning of the organization.
7. **Suspension / cancellation (Rule 5):** Registration may be suspended or cancelled for contravention of the Act, the Rules or any other law relating to destitute and neglected children, after an opportunity of being heard. Children are then shifted to a Child Protection Institution or accommodation of another registered organization.
8. **Declaration:** Furnishing false information or failure to discharge obligations makes the organization liable to disciplinary action, including cancellation of registration.

Structure of this Form

Part	Contents	Page
Part A	Applicant / owner details, key contact person, list of office bearers	Page 2 (one side)
Part B	Organization details: identity, registration, bank account, facility, premises, mission & capacity, staff, transport, health, counselling, education	Pages 3 onwards
Part C	Affidavit and undertaking (Rs. 100/- stamp paper), witnesses	After Part B
Part D	Checklist of documents to be attached	After Part C
Part E	For office use of CP&WB only	Last page

PART A — APPLICANT / ORGANIZATION OWNER DETAILS

*Details of the **Chairperson / President / Chief Executive / Owner** who is submitting and signing this application.*

A1. Personal Particulars

Full Name (as per CNIC)		**Father's / Husband's Name**	**Affix recent passport-size photograph**
CNIC No. (13 digits)	**Date of Birth**	**Gender** ☐Male ☐Female ☐Other	
Designation in Organization	**Nationality**	**Occupation / Profession**	
Mobile No.	**Landline No. (with code)**	**Email**	
Fax No.	**Website (if any)**		

A2. Mailing Address of Applicant

Mailing Address (House / Building No., Street, Mohalla / Area)				
Division	**District**	**Tehsil**	**City / Town**	
Union Council / Ward / Village	**Area Type** ☐Urban ☐Rural	**Postal Code**	**Nearest Landmark**	**Police Station**

Permanent address same as mailing address? ☐Yes ☐No	**If No, write permanent address with Division / District / Tehsil / City-Town**

A3. Key Contact Person (if different from applicant)

Name	**Designation**	**CNIC No.**
Address		
District	**Tehsil**	**City / Town**
Landline No.	**Mobile No.***	**Email**

A4. List of Office Bearers

S#	Full Name	Designation	CNIC No.	Mobile No.*	Signature
1					
2					
3					
4					
5					

S#	Full Name	Designation	CNIC No.	Mobile No.*	Signature
6					
7					
8					

PART B — ORGANIZATION DETAILS

Details of the organization and of the accommodation it manages (or intends to manage) for destitute and neglected children.

B1. Identity and Contact Details of the Organization

Full Name of Organization			
Abbreviation / Short Name	**Year of Establishment**	**NTN (if any)**	
Office Landline No.	**Mobile No.**	**Fax No.**	
Email	**Website**		

B2. Head Office / Registered Address

Head Office Address (Building No., Street, Mohalla / Area)				
Division	**District**	**Tehsil**	**City / Town**	
Union Council / Ward / Village	**Area Type** ☐Urban ☐Rural	**Postal Code**	**Nearest Landmark**	**Police Station**

B3. Legal Registration of the Organization

Registered under (tick one)	
☐Societies Registration Act, 1860	☐Trust Act, 1882 / Punjab Trust Act, 2020
☐Voluntary Social Welfare Agencies (Registration and Control) Ordinance, 1961	☐Voluntary Social Welfare Agencies (Registration and Control) Rules, 1962
☐Cooperative Societies Act, 1925	☐Companies Ordinance, 1984 / Companies Act, 2017
☐Social Welfare Agencies (Registration & Regulation) Act, 1996	☐Charitable Endowment Act, 1890 / Punjab Charities Act, 2018
☐Any Other Law (please specify): _____	
Registration No.	**Date of Registration**
Registering Department / Office	**Registration valid up to / last renewed on (if applicable) (mention dd/mm/yy)**

B4. Organization's Bank Account Information

Name of Account Holder (Account Title)		**Bank Account No. / IBAN**
Name of Bank	**Branch Name & Code**	**Phone No. of Bank / Branch**
Mailing Address of the Bank		**Fax No. of Bank**

B5. Facility and Children

This facility is meant for (tick one)	Age group of children admitted (years)	Approved / available capacity (beds)
☐Male ☐Female ☐Both	From _____ To _____	

Number of children (Mention Date)	Boys	Girls	Total
Currently residing in the accommodation			
Total admitted / registered up till now (since inception)			

B6. Premises where the Accommodation for D&N Children is Located

Name of Accommodation / Institution			Property status (tick one) ☐Owned property ☐Rented property	
Address of Premises (Building No., Street, Mohalla / Area)				
Division	District	Tehsil	City / Town	
Union Council / Ward / Village	Area Type ☐Urban ☐Rural	Postal Code	Nearest Landmark	Police Station
GPS Location (latitude, longitude) — *				
Total land — Kanal	Marla	Covered area (sq. ft.)	Open area (sq. ft.)	
No. of rooms	No. of washrooms	Kitchen ☐Yes ☐No Area: _____	Play area ☐Yes ☐No Total area: _____	
Electricity connection ☐Yes ☐No	Gas connection ☐Yes ☐No	Telephone connection ☐Yes ☐No	Safe drinking water ☐Yes ☐No	
If rented: Name of owner / landlord	Monthly rent (Rs.)	Rent agreement valid up to		

B7. Other Information (tick the relevant box)

Ref	Particulars	Yes	No
a.	Fiscal year end (tick one)	☐January to December ☐July to June	
b.	Computerized accounting system	☐Yes	☐No
c.	Audited accounts for last 3 years attached	☐Yes	☐No
d.	Income and expenditure statement of last year attached	☐Yes	☐No
e.	Program funded by grant If yes, tick source: ☐Foreign Government ☐Federal Government ☐Provincial Government ☐ Any other source	☐Yes	☐No
f.	Organizational chart attached	☐Yes	☐No
g.	Major Activities undertaken in last six months (Attach Details)	☐Yes	☐No
h.	Whether the organization is under observation under the Anti-Terrorism Act, 1997?	☐Yes	☐No

Ref	Particulars	Yes	No
i.	Whether any employee of the organization is enlisted in the Fourth Schedule of the Anti-Terrorism Act, 1997 or involved in any criminal activity?	☐Yes	☐No
j.	Whether the organization has suitable building capacity and necessary amenities for the protection and rehabilitation of the destitute and neglected children?	☐Yes	☐No
k.	Whether suitable food shall be provided to the destitute and neglected children?	☐Yes	☐No
l.	Whether suitable atmosphere will be provided for social activities to the destitute and neglected children?	☐Yes	☐No
m.	Whether the organization shall maintain the record of each destitute and neglected child?	☐Yes	☐No
n.	Whether a written procedure for rehabilitation of destitute and neglected children has been prepared (Rule 9(2))?	☐Yes	☐No

B8. Organizational Mission and Capacity

(a) A description of your mission, or a mission statement, if available

(b) What are the goals of your organization?

(c) A description of the services / activities your organization provides

(d) Who are your beneficiaries (groups, organizations, etc.)? Where possible, please give quantitative expressions.

(e) Examples of current or previous beneficiaries (NGOs, CBOs, etc.) that your organization has assisted

S#	Beneficiary / Organization	Support / Assistance Provided
1		
2		
3		

(f) What is your direct experience of working with local communities to assist them in identifying and solving local issues?

(g) Partnerships you have had with other NGOs, CBOs, local authorities, private businesses, etc.

S#	Organization, Business or Institution	Description of Partnership
1		
2		
3		

(h) Main sources of funding of your organization. If you have received grants or other forms of financial support, please list them.

S#	Source of Funding	Project / Program	Services Provided	Project Dates	Total Sum (PKR)
1					
2					
3					

(i) What kind of programs have you implemented? Please provide details of programs implemented during the last three years, if applicable.

(j) Details of any external audits undertaken in the last three years, if applicable

B9. Details of Professional Staff / Employees

List of key staff / employees with responsibilities. Please provide complete CVs (visiting and permanent staff).

S#	Full Name	CNIC No.	Position/ Designation	Responsibilities	CV attached with references? (Y/N)
1					
2					
3					
4					
5					
6					

B10. Details of Transport Available with the Organization

S#	Brand of Vehicle	Model	Registration No.	Remarks
1				
2				
3				
4				

B11. Health Care Facility (Rule 9(3))

8.1 Routine health care — Name of Doctor	Type ☐Visiting ☐Permanent	Qualification / PMDC No.
Address and contact number of the Doctor		
8.2 In case of emergency — Name of Hospital	Phone No.	
Address of Hospital		

B12. Psycho-social Counselling Facility

Name of Psychologist	Type ☐Visiting ☐Permanent	Qualification

Address and contact number of the Psychologist

B13. Educational Facility

Internal arrangement (describe classes, teachers, curriculum, etc.)	
External arrangement — Name of School	Address of the School

PART C — AFFIDAVIT AND UNDERTAKING

(To be executed on Rs. 100/- Stamp Paper and attested by Oath Commissioner / Notary Public)

I (Name of Deponent)	d/s/w of

do hereby solemnly affirm that I have submitted all information and obligations true to the best of my knowledge & belief. In case any information contained herein is found to be untrue or failure of discharge of any such obligation, I shall be liable to disciplinary action which may result in cancellation of registration of my organization.

I further undertake, in accordance with the Punjab Destitute and Neglected Children (Registration of Organizations Managing Accommodation) Rules 2019, that:

1. I shall facilitate inspection of the premises by the Registering Authority or its authorized officer and shall provide the relevant record relating to the management of the accommodation and welfare of the children (Rule 7).
2. All decisions of the organization shall be made in the best interest and welfare of the destitute and neglected child (Rule 9(1)).
3. I shall define the procedure for rehabilitation of the destitute and neglected children and submit its copy to the Registering Authority (Rule 9(2)).
4. The organization shall have a medical facility to examine the children on need basis, and shall allow examination of a child by the Medical Officer of a Government Hospital if so directed by the Registering Authority (Rule 9(3)).
5. A child shall be discharged before eighteen years of age and handed over to his/her family only if so desired by them and after intimation to the concerned District Officer of the Child Protection & Welfare Bureau or the CP&W Bureau (Rule 9(4)).
6. In case of suspension or cancellation of registration, the children accommodated by the organization shall be shifted to the Child Protection Institution or any other registered organization (Rule 5(4)).
7. I shall apply for renewal of registration along with the renewal fee thirty days before the date of expiry of registration (Rule 4(1)).

Deponent

Name	CNIC / ID Card No.	Date

Signature / Thumb Impression	Designation & Organization Seal / Stamp

Witness 1

Name	CNIC / ID Card No.	Date

Signature	Address / Mobile No.

Witness 2

Name	CNIC / ID Card No.	Date

Signature	Address / Mobile No.

Attestation — Oath Commissioner / Notary Public (Name, Stamp, Signature and Date)

PART D — LIST OF DOCUMENTS TO BE ATTACHED WITH APPLICATION

S#	Document	Attached	No. of pages
1	Photocopy of Registration Certificate of the organization	☐Yes ☐N/A	
2	Three recent passport-size pictures of the applicant	☐Yes ☐N/A	
3	Copy of bank statement for the last six months	☐Yes ☐N/A	
4	Copy of last audit report	☐Yes ☐N/A	
5	Copy of current report published by the organization	☐Yes ☐N/A	
6	Copy of property documents (if owned)	☐Yes ☐N/A	
7	Copy of rent deed / agreement (if rented)	☐Yes ☐N/A	
8	Copy of CNIC of applicant and both witnesses	☐Yes ☐N/A	
9	Copies of paid utility bills for last three months, i.e. telephone, gas and electricity	☐Yes ☐N/A	
10	Complete CVs of all staff working in the organization (both visiting and permanent)	☐Yes ☐N/A	
11	Registration copies of vehicles being used in the organization	☐Yes ☐N/A	
12	Copy of mission statement of the organization	☐Yes ☐N/A	
13	Fee of registration — original deposit receipt of Rs. 1,000/- (Rs. 500/- for renewal) in head of account “C-03 Miscellaneous Receipt CO-3859-Collection of Registration/Work Permit Fee”	☐Yes ☐N/A	
14	Affidavit on Rs. 100/- stamp paper (Part C)	☐Yes ☐N/A	
15	Items marked “attached” in B7: audited accounts (3 years), income & expenditure statement, organization chart, list of activities of last six months	☐Yes ☐N/A	
16	Written procedure for rehabilitation of children (Rule 9(2)), if prepared	☐Yes ☐N/A	
17	Copy of previous Registration Certificate (Form-B) — renewal applications only	☐Yes ☐N/A	

PART E — TO BE USED BY CP&WB ONLY (OFFICE USE)

Application submission date	**Diary No.**	**Issued by**
Submitted for the first time? ☐Yes ☐No	**If No, previous diary No.**	**Name of official receiving form**
Registration fee verified (Rs. 1,000/- / Rs. 500/-) ☐Yes ☐No	**Deposit receipt / challan No.**	**Date of deposit**
Documents checked against Part D ☐Complete ☐Incomplete	**Deficiencies communicated on**	**Deficiencies removed on**
Report sought from Deputy Commissioner on	**DC report received on**	**DC report** ☐Satisfactory ☐Not satisfactory

Premises inspected by (authorized officer, not below BS-17)	**Date of inspection**	**Inspection outcome** ☐Satisfactory ☐Not

Status of form ☐Accepted ☐Rejected	**If rejected, rejected by**	**Date of decision**
Reasons for rejection (to be recorded in writing — Rule 3(5)) / Remarks		
Registration Certificate (Form-B) No.	**Date of issue**	**Valid from — to (initially one year)**

Name & Stamp of Verifying Officer	**Registering Authority (Director General, CP&WB) — Signature & Seal**