**FORM FC –3**

**[See rule 9 (1) (a)]**

**No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date 8th February 2016**

**The Secretary to the Government of India,**

**Ministry of Home Affairs,**

**FCRA Wing / Foreigners Division,**

**“NDCC-II Building”,**

**Jai Singh Road,**

**OFF Parliament Street,**

**New Delhi – 110001.**

**Sub:** Application for ‘registration’ under section 11(1) of the Foreign Contribution (Regulation) Act, 2010 for the acceptance of foreign contribution by an Association having definite cultural, economic, educational, religious or social programme:

**Sir,**

I **DR. MAJID JAMIL** on behalf of the Association furnish the following details for approval of the central government for the acceptance of foreign contribution under-subsection (1)/ (2) of section 11/ Section 16 of the act for

**Registration**

Details of the Association:

1. Name of the Association and its complete postal address:
2. Name: **FAITH SOCIAL AND EDUCATIONAL WELFARE SOCIETY**
3. Address: **13/1836 QUAZI STREET SAHARANPUR**

Town/City: **SAHARANPUR U.P (ALL U.P)**

District: **SAHARANPUR**

State: **UTTAR PRADESH**

Pin Code: **247001**

(c) Telephone No. of the Association (with STD code): 0132-2645056, 09045322828

(c) Telephone no. (with STD code) / Mobile no. ~ of the Chief Functionary: 09313462108

(d) e-Mail address: [majidjamil@hotmail.com](mailto:majidjamil@hotmail.com)

2. a) Society registration Act, 1860

If the Association is a registered Trust or Society please indicate its:

(b)Registration number**: New -011506, Old 9709-(8)**

Place of registration**: SAHARANPUR**

Date of registration**: New- 06/11/2015, Old- 18/06/2010**

**(Certified copy of the registration certificate attached).**

(c) PAN No.: **AAGPJ1165P**

**d) So far not registered under FCRA**

**3** Nature of Association:

(a) religious

(b) Cultural

(c) Economic

(d) **Educational**

(e) **Social**

Note: If a religious Association, state whether (a) Hindu (b) Sikh (c) Muslim (d) Christian (e) Buddhist (f) Others.

**4** Main aim(s) and object(s) of the Association (enclose a copy of the Memorandum of Association and/or the Articles of Association, if applicable);

**ATTACHED**

**5** Details of names and addresses of the members of the Executive Committee/Governing

Council etc. of the Association, starting with the Chief Functionary, in the following table:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sl. No.** | **Name** | **Name of father/husband** | **Nationality** | **Aadhar No** | **Occupation with address of place of work (at the time of filing the application. Phone/mobile no. if available.)** | **Post held in the Association** | **Relationship with other Member(s) of the Exe. Council / Governing body** | **Address for correspondence** |
| **1** | **Mr.**  **Iftakhar Mahmood** | Mr. Mahmood Hasan | **INDIAN** |  | Engineer | President | **Governing body** | Nakhasa Bazar  Saharanpur, U.P |
| **2** | **Dr Anwar Shahzad Siddiqui** | Mr Qutubuddin Siddiqui | **INDIAN** |  | Professor | Vice President | **Governing body** | Flat No 304, IIIrd Floor  F-136, Shaheen Bagh  Okhla, Jamia Nagar  New Delhi-25 |
| **3** | **Dr. Majid Jamil** | Mr. Jamil Ahmad | **INDIAN** | 776047540198 | Professor | Secretary | **Governing body** | B-40,Mujeeb Bagh  Jamia Nagar, Okhla  New Delhi – 110025 |
| **4** | **Mr. Mohd. Arshad** | Mr. Mohd. Amin | **INDIAN** | 773399036393 | Business | Joint Secretary | **Exe. Council** | Azad Colony,  Opposite Islamia Inter College  Eid Gaah Road, Saharanpur, U.P. |
| **5** | **Dr. Iffat Masood Javed** | Dr.Javed Jamil | **INDIAN** | 583907386930 | House Wife | Treasurer | **Exe. Council** | 13/1836,Mohalla Quazi Mohsinian  Saharanpur, U.P. |
| **6** | **Mr. Mohammad Rizwan** | Mr.Momin Khan | **INDIAN** |  | Asst Professor | Governing Member | **Exe. Council** | F A-23 First Floor  AbulFazalEnclaveI  JamiaNagar,Okhla, New Delhi-25 |
| **7** | **Mr. Mansoor Azam** | Mr.Mazhar Akbar | INDIAN | 508828638617 | Business | Governing Member | **Exe. Council** | First Floor, Falak Apartments A-4, Block A Okhla Vihar  Jamia Nagar, New Delhi-110025 |

**b) NO member is foreigner**

**6. Amount of fee paid**

**7. Whether any Member of the Executive Committee /Governing Council etc. of the Association, including the Chief Functionary has, in the discharge of his/her official functions or private conduct:**

(a) been convicted by any court of law: **NO**

(b) a prosecution for any offence pending against him/her: **NO**

(c) been found guilty of diversion or mis-utilisation of funds of the Association or any other Association in the past: **NO**

(d) has been prohibited from accepting foreign contribution: **NO**

(e)Secretary of a residential welfare society

(f) is a Member or Chief Functionary of any other Association against whom an order under section 13 or 14 of the Foreign Contribution (Regulation) Act, 2010 (42 of 2010) has been passed: **NO**

**8 Whether the applicant Association:**

(a) is a branch/unit/associate of foreign based organisation or another Association already registered or granted prior permission under the Act. If so, name and address of the parent organisation should be furnished: **NO**

(b) attracts section 10 of the Act, if so details of the order passed by the Central Government: (c) section 11(3) of the Act: **NO**

(c) has been directed in terms of section 9 (a) of the Act to seek prior permission by the Central Government. If so, the number and date of the relevant order: **NO**

(d) had earlier been proceeded against as per provision of the Foreign Contribution (Regulation) Act 1976 (49 of 1976): **NO**

**9 Details of the designated FC bank account for receipt of foreign Contribution**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of the Bank** | **Branch ADDRESS** | **IFSC CODE** | **Account No** |
| **State Bank of India** | **Branch Moregunj, Saharanpur, U.P.**  **247001**  **Branch Code 04538** | **SBIN0004538** | **35542264537** |

**Details of all utilization bank accounts for utilization of foreign contribution**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of the Bank** | **Branch ADDRESS** | **IFSC CODE** | **Account No** |
| **Punjab National Bank** | **Branch Shastri Market Raiwala Chowk Saharanpur, U.P.**  **247001** | **PUNBO316100** | **3161000109174955** |

**10. Whether**:

**(i)** **APPLYING FIRST TIME**:

**(ii) Whether: NO**

(a) the Association has received foreign contribution without the prior permission under the Act in the past. If so, full particulars of the foreign contribution received along with complete address of the bank branch and bank account number in which deposited should be furnished: **NO**

(b) said violation has been condoned by the Central Government: **NO**

(c) Association has been prohibited from accepting foreign contribution under the Act: **NO**

**11.** Whether:

(i) the Association had applied for registration under the Foreign Contribution (Regulation) Act, 1976 (49 of 1976) / Foreign Contribution (Regulation) Act 2010 (42 of 2010) in the past, and if so details thereof, **NO**

(ii) the Association had applied for prior permission under the Foreign Contribution (Regulation) Act, 1976 (49 of 1976) / Foreign Contribution (Regulation) Act 2010 (42 of 2010) in the past, and if so, details thereof **NO**

(iii) the Association has close links with any another Association(s), or its unit(s) or branches, which has been, **NO**

(a) refused registration / prior permission : **NO**

(b) prohibited from accepting foreign contribution: **NO**

(c) suspended or whose registration has been cancelled: **NO**

(d) if answer to any of (a) to (c) is yes, please give full particulars

12. Details of commitment of foreign contribution from donor. (applicable to prior permission cases only): **NO**

|  |  |  |  |
| --- | --- | --- | --- |
| Nature of the foreign contribution | Value  (including name of currency) | Name of the project/ Activity; address of implementation with brief details of the project and budget break-up | Purpose (Cultural/ economic/ educational/ religious/ social) |
|  |  |  |  |

13. Details of foreign source(s) from which the foreign contribution is proposed to be received (applicable to prior permission cases only): **So far no one committed**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| |  |  |  | | --- | --- | --- | | Name of foreign source |  |  | | Office Address; official e-mail address | In case of individual donor |  |
|  |  |  |  |

Yours faithfully,

Signature of the Chief Functionary

[Dr. MAJID JAMIL]

(Seal of the Association)

**Declaration and Undertaking**

(a) I hereby declare that the information furnished above is true and correct; and I undertake:

(b) That the receipt of foreign contribution and its utilization shall not be violative of any of the provisions of the Foreign Contribution (Regulation) Act, 2010 (42 of 2010) / rules, notifications / orders issued there under from time to time;

Place: SAHARANPUR

Date: 8 FEBRUARY 2016

Signature of the Chief Functionary

[Dr. MAJID JAMIL]