



Health for the Poorest

CHECKLIST FOR NGOs

S.N	List of Documents	Available		Detail Information			Remarks/ Additional Information
		Yes	No				
Human Resource and Administration							
1	District Administration Office (DAO) Registration			Registration Number and Registered District:	Last Renew Date:	Valid Date:	
2	Organization Statute						
3	Affiliation with Social Welfare Council			Affiliation Number:	Last Renew Date:	Valid Date:	
4	Permanent Account Number (PAN)			Number:			
5	Inclusiveness in board member composition						
6	Regular General Assembly Held <i>(mention the last general assembly date on the remarks column)</i>						
7	Policies						
	a Human Resource (aligned with Labor Act 2074) <i>specify the major existing provisions in the remarks/additional information column</i>						
	b Admin						
	c Code of Conduct						
	i Prevention of Sexual Exploitation Abuse and Harassment (PSEAH)						
	ii Child Protection						
	iii Anti-corruption						
	d Gender and Social Inclusion						



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Finance and Compliance							
1	Tax Clearance Certificate			Last Tax Clearance Date:			
2	Finance/Procurement Policy						
	a. Internal Control Mechanism in place						
	b. Zero Tolerance/Anticorruption mechanism						
3	Accounting Software <i>(mention name of software in the remarks/additional information column)</i>						
Program							
1	Give brief description about major expertise of the organization						
2	List of existing projects and funding partners						
3	Experience						
	a. Neglected Tropical Diseases <i>(For Example: Leprosy, Filariasis, Soil Transmit Helminthes, Kala-azar). (any one or more diseases)</i>						
	b. Maternal and Neonatal Health						
	c. WASH						
	d. Disability						
	e. Community Awareness, Mobilization and Empowerment						
	f. Advocacy with Government and other stakeholders						
	g. Others <i>(please specify)</i>						
4	Experience working with local groups/committees (mothers' group, self-help groups, child clubs, etc)						
5	M&E policy framework and Quality Control Measures/tools exists						



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6	Achievements/Reports/ Success stories are well documented and shared with concerned stakeholders			<i>(if yes, mention your publication)</i>			
7	Progress Report Published <i>(mention the last annual report published on the remarks column)</i>						

Instructions:

- This checklist should be filled and signed by the authorized person of the organization and also should include the organization stamp.
- You can increase/decrease the table size but please do not change the table format.