

PROFILE OF THE RESOURCE PERSON

1.	Name:-					Paste a Passport Size Photograph
2.	Date of Birth:-			3. Gender:-		
4.	Full details of registered address for Communication:-					
Office:-						
Residence:-						
5.	Educational Qualification(Please attach photocopy of certificate)					
	Examination passed	Board/University	Year of Passing	Percentage%	DIV	
	Communication with Code Number			Mobile No:		
				Email Id:		
	Languages Known		YES/NO			
	Khasi					
	Garo					
	English					
	Hindi					
	Others(Specify):					
6.	Details Experience (Certificates to be attached with)					
	Organisation	Years of Working	Nature of Work	Designation	Reason of Leaving	
	1.					
	2.					
	3.					
	4.					
	5.					
7.	Skill Sets (Certificates to be attached with)					

Annexure A: - Profile of a Resource Person

(i)	No. of the Training attended:		
a.	Name of the Training attended	Name of the Organising Institute etc.,	Thematic Area
	1		
	2		
	3		
(ii)	No. of the Training conducted:		
b.	Name of the Training conducted	Name of the Organising Institute etc.,	Thematic Area
	1		
	2		
	3		
8.	Area of Expertise:	<div style="border: 1px solid black; padding: 2px;"> 1. </div> <div style="border: 1px solid black; padding: 2px;"> 2. </div> <div style="border: 1px solid black; padding: 2px;"> 3. </div>	
9.	<i>Any other area of interest(Please Tick):</i> <div style="list-style-type: none; padding-left: 20px;"> 1. Social Mobilisation 2. Enterprise Development (Including EDP) 3. Value Chain Development 4. Market Linkage 5. Financial Linkages (Including preparation of Detailed Project Report etc.,) 6. Infrastructure Development 7. Soft skills 8. Others(Specify):- </div>		
10.	<i>Willingness to travel to remote villages for overnight stay</i>		YES/NO
11.	<i>Affiliations:</i>		
	1. Are you already identified by any District/State/Programme/Organisation as a Resource Person? Give details		
	2. Have you developed any resource materials module? YES/NO, If yes please detail out		

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Date: -

Signature:-

Place: -

Name in Full:-

Contact No:-