



No.CP&WB (PA-DP)/2023-926
GOVERNMENT OF THE PUNJAB
CHILD PROTECTION & WELFARE BUREAU
ANGURI BAGH SCHEME, SHALIMAR LINK ROAD, LAHORE

Dated 21.1.2023

To,

Deputy Commissioner,
Multan

**Subject: APPLICATION OF BAIT-E-JAMILA FOUNDATION U/S 3 OF PUNJAB
DESTITUTE & NEGLECTED CHILDREN (REGISTRATION OF
ORGANIZATIONS MANAGING ACCOMMODATION) RULES 2019 FOR
NOC/SATISFACTORY REPORT OR VICE-VERSA**

Child Protection & Welfare Bureau, Punjab was established under the Punjab Destitute & Neglected Children (PDNC) Act 2004. It is autonomous body working under the administrative control of Home Department, Govt. of the Punjab. At present, Protection of Destitute & Neglected Children is mandate of Child Protection & Welfare Bureau (CP&WB), Punjab (Home Department).

It is stated that under rule 3 of Punjab Destitute & Neglected Children (Registration of Organization Managing Accommodation) Rules, 2019. Bait-e-Jamila Foundation Street No.3 Ali Park Phase-1 Bajwa Chowk Near Masjid Idrees Qasim Bela, Multan has applied for Registration-to-Registration Authority on Form-A (Annex-A).

The request of Bait-e-Jamila Foundation, Multan is being forwarded u/s 3(3) & (4) of Punjab Destitute & Neglected Children (Registration of Organization Managing Accommodation) Rules 2019 for NOC/Report.

**DIRECTOR PROGRAM
CHILD PROTECTION & WELFARE BUREAU
PUNJAB, LAHORE**

C.c:

1. Section Officer (Dev.), Home Department, Govt. of the Punjab
2. Chairperson BoG, Child Protection & Welfare Bureau, Punjab.
3. In-charge Bait-e-Jamila Foundation, Multan.
4. All Committee Members, Child Protection & Welfare Bureau, Lahore.
5. Office copy/Record Cell.

**APPLICATION FORM FOR REGISTRATION OF ORGANIZATION MANAGING
ACCOMMODATION FOR DESTITUTE AND NEGLECTED CHILDREN UNDER PUNJAB
DESTITUTE AND NEGLECTED CHILDREN ACT 2004**

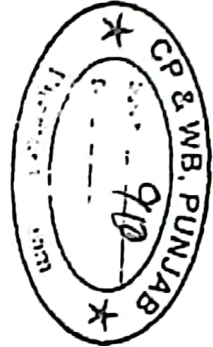
To:

The Director General
Protection & Welfare Bureau, Govt. of Punjab
Angori Bagh Scheme, Shallmar Link Road, Lahore.

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

1.

- a Name: Balt-e-Jamila Foundation
b CNIC No: 9040601757807
c Mailing Address: Street No. 3 All Park Phase-1 Bajwa Chowk Near Masjid Idrees Qasim Bela Multan
d Phone Numbers:-
Land line #: Under process Mobile #: 03005554330
e Fax number: -
f Email: baltelamila786@gmail.com
g Website: https://baltelamila.foundation.business.site/
h Key Contact Person Name: Elaz Ahmed Bhutta
Address: House No. 12/4A Qaid-e-Azam Road Multan Cantt
Land line #: 061-2033990 Mobile #: 03006840824



1.1 List of Office Bearer:-

- a. Mahmood Hassan Shahid S/O Khuda Bakhsh (Late), (President)
b. Major (Retired) Javed Mussarat S/O Mussarat Mirza Balq (Late),
c. (General Secretary)
d. Elaz Ahmed Bhutta S/O Muhammad Nawaz Ayaz (Late), (Finance Secretary)

1.2 Organization Account Information:-

- a Name of Account number : Balt-e-Jamila Foundation
b Bank Account Number: 1505057951013632
c Mailing address of the bank: 0504 MCB Multan Cantt Branch
d Phone numbers of the bank: 061-4545576
Fax numbers of bank: 061-4518107



Put up. 4/8
o/c Field

DG CP&WB	
Diary No.	924
Date	4-8-23
Dir. (Admin)	
Dir. (Prog)	
Sup (Admin)	
Sup (Prog)	
Sup (Fin)	

Registered under (please Tick)

- ☒ Registered under Societies Registration Act, 1860.
- ☐ 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.
- ☐ Social Welfare Agencies (Registration & Regulation) Act, 1996
- ☐ Trust Act, 1882
- ☐ Charitable Endowment Act, 1890
- ☒ Others Please specify.
(Govt. of Punjab Charities Act 2018).

- 2.1 Number and date of Registration of organization by Government of the Punjab:
Punjab Societies Registration No: RM/01 dated 18 Jan 2023 and Punjab Charity
Commission Registration No: PB-MUL-0776133057238755 dated 18 Jul 2023
(Photocopies attached).

3. Other Information

a. Fiscal Year end (tick one)

- ☐ January to December
- ☐ ☒ July to June

b. Fiscal Year end

c. Computerized accounting system

- ☒ Yes ☐ No

d. Audited accounts for last 3 years attached

- ☐ Yes ☒ No

e. Income and expenditure statement of last year

- ☒ Yes ☐ No

f. Program funded by grant

If yes, please tick one relevant box:

- ☐ Yes ☒ No

☐ Foreign Government

☐ Federal Government

☐ Provincial Government

☐ Any other source

- Organization chart attached ☒ Yes ☐ No
- h. Activities undertaken in last six months ☐ Yes ☒ No
- i. That whether an Organization is under observation Under Anti-Terrorism Act, 1997? ☐ Yes ☒ No
- j. That whether an employee of an Organization is enlisted in the fourth schedule of Anti-Terrorism Act, 1997 or involved in any criminal activity? ☐ Yes ☒ No
- k. That whether an Organization has suitable building capacity and necessary amenities for the protection and rehabilitation of the destitute and neglected children? ☒ Yes ☐ No
- l. That whether suitable food shall be provided to the destitute and neglected children? ☒ Yes ☐ No
- m. That whether suitable atmosphere will be provided for social activities to the destitute and neglected children? ☒ Yes ☐ No
- n. That whether an Organization shall maintain the record of each destitute and neglected child? ☒ Yes ☐ No
4. This facility is meant for:

- ☐ Male
- ☐ Female
- ☒ Both

4.1. Total number of admitted/ registered children up till now: NIL

4.2. Detail of Land where CPI is located:

- 1) Owned property ☒ 2) Rented property ☐

4.3. District: Multan Tehsil Multan U/C 80

4.4. Address: Street No. 3 All Park Phase-1 Balwa Chowk Near Masjid Idrees Qasim Bela Multan

4.5. Total land: Kanal 9 Marla's 1 Marla & 181 Feet

4.6. Covered area 4 Kanal Open area 5 Kanal, 1 Marla & 181 Feet

4.7. No. of rooms 49 No. of wash rooms 40

4.8. Kitchen: Yes ☒ No ☐

4.8. area of kitchen: 13 x Kitchen also 12x12ft

4.9 Play area: Yes ☒ No ☐
If yes, total play area 3 Kanal

4.10. Electricity connection Yes ☒ No ☐

4.11. Gas connection Yes ☐ No ☒

4.12. Telephone Connection Yes ☐ No ☒

5. Organizational mission and capacity

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

To create a loving home for orphaned children and raise them to have good moral character & education so they can realize their highest human potential.

b) What are the goals of your organization?

Bait-e-Jamila Foundation will focus on the development of orphans and abandoned children in to self-supporting and contributing members of society. The philosophy of Bait-e Jamila Foundation is very simple to provide children atmosphere of happiness, love and understanding.

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

Following facilities/services will be provided to children for their rehabilitation:-

- | | |
|-----------------------|--------------------------|
| a. Accommodation | e. Medical care facility |
| b. Food/Cloth/Bedding | f. Sports |
| c. Education | g. Religion Education |
| d. Computer Skills | |

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

NII

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

Beneficiaries/Organization	Support/Assistance Provided
NII	NII

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

NII

Please list below the partnerships you have had with other NGOs, CBOs, local authorities, private business etc.

Organization/Business or Institution	Description of Partnership
NII	NII

- h) What are the main sources of funding of your organization? If you have Received grants, or other forms of financial support, please list them.

Source of Funding	Project or Program	Services Provided	Project Date	Total Sum
-	-	Self-Financing	21 Dec 2021	-

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

NA

- j) Please give details of any external audits undertaken in the last three years if applicable:

NII

6. Detail of professional staff/ Employees

List of key staff/ employees with responsibilities: please provide complete CV's.

Full Name	Position	Responsibilities	CV attached [Y/N]
Ejaz Ahmed Bhutta	Finance Secretary	Overall in-charge / responsible for running of the foundation	Yes
Khushnood Munawar	Accountant/ Superintendent	Responsible for smooth functioning of offices / accounts	Yes
Nimra Malik	Data Administrator / Clerk	Responsible for smooth functioning of offices / Children Dossier	Yes
Muhammad Ismail	Naib Qasid	Assistant admin/Office / Handyman	Yes

7. Detail of transport used in the organization

S/No	Brand of Vehicle	Model	Qty
-	-	-	-

Health care facility:

8.1. Routine health care arrangement

Name of Doctor: Dr. Shumaila Shahid

☒ Visiting

☐ Permanent

Address and contact number of the Doctor: Rotary Dispensary Qasim Bela
Multan: Mob No. 03065330298

8.2. In case of emergency:

Name of hospital: Children / Nishtar Hospital Multan

Address: Near Fowara Chowk Abdali Road, Multan/ Near -
Chongli No. 1 Nishtar Road Multan

Phone number: 061-9200231
061-9201431

9. Psycho-social counselling facility:

Name of psychologist _____

☒ Visiting

☐ Permanent

Address and contact number of the psychologist _____

10. Educational facility:

10.1. Internal arrangement:

Millat Islamic Higher Secondary School Qasim
Bela Multan

10.2. External arrangement:

Name of school: NII

Address of school: NII

of Documents to Be Attached With Application

Documents to be attached with the application form:

- Photocopy of registration certificate of an organization.
- Three recent passport size photographs of the applicant.
- Copy of bank statement.
- Copy of property documents, if owned.
- Copy of CNIC of applicant and witnesses.
- Copy of paid utility bills for last three months i.e. Telephone, Gas, and Electricity.
- Complete CVs of all staff working in the organization (both visiting and permanent).
- Copy of mission statement of the organization.
- Fee of registration.
- Income and expenditure statement of last year.
- Affidavit on Stamp Paper

To be used by CP &WB only:

Application submission date _____

Whether it is submitted first time Yes ☐ No ☐

If yes then write down previous dairy number

Diary number _____

Issued by _____

Name of official receiving form _____

Status of form: Accepted ☐ Rejected ☐

If rejected then rejected by _____

Reasons for rejection _____

Name and stamp of verifying officer