

Application Form: Pradhan Mantri Krishi Sinchayee Yojana

Application Details (auto populated)

Registration ID: _____ **Category:** Priority Programme – Pradhan Mantri Krishi Sinchayee Yojana (PMKSY)

District: _____ **State:** _____ **Group:** _____

Application Form (to be filled by District representative)

Please note that the period of implementation to be considered is between 1st April, 2015 and 31st December, 2016.

1. Please enter values for following:

A. Has the 'District Irrigation Plan' been prepared?	<input type="radio"/> Yes <input type="radio"/> No
B. Increase in Irrigation potential between 1 st April, 2015 and 31 st Dec, 2016 (hectares)	
C. Increase in coverage under micro-irrigation between 1 st April, 2015 and 31 st Dec, 2016 (hectares)	
D. Number of Water Harvesting Structures built in the district between 1 st April, 2015 and 31 st Dec, 2016	

2. Please provide a write-up of work done in your district between 1st April, 2015 and 31st December, 2016 under the scheme, highlighting strategy adopted in implementation, achievements, outcomes, impact and sustainability.

<1200 words>

Upload information of persons who are covered under PMKSY programme (Name, Phone number etc.):

Upload supporting documents (e.g. flowcharts etc.):

Upload relevant photographs (maximum 10):

Provide links of videos (duration 3-5 minutes), if any, on implementation of PMKSY in your district:

I, hereby, certify that the information and particulars furnished above are true and correct to the best of my knowledge.

Name:

Designation:

Place:

Date: