Sample 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:	Group:	
Appli	cation Form (to be filled by Distr	ict repr	resentative)		
Pleas	e note that the period of implemen	tation t	o be considered is between 1st April, 2015 and 31st December, 20	016.	
1.	Please enter values for following	ng:			
	A. Has the 'District Irrigation Plan' been prepared?			o Yes o 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 1st April, 2015 and 31st Dec, 2016				
2.	-		ne in your district between 1 st April, 2015 and 31 st December, in implementation, achievements, outcomes, impact and sus		

Upload information of persons who are covered under PMKSY programme (Name, Phone number etc.): (The document must be uploaded in PDF format with file size not exceeding 2 MB)				
Upload supporting documents (e.g. flowcharts etc.): (The document must be uploaded in PDF format with file size not exceeding 2 MB)				
Upload relevant photographs (maximum 10): (The photograph(s) must be uploaded in jpeg or png format with each file size not exceeding 2 MB)				
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:				