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b. Details of Blood Donation:- Please attach List of Blood Donors along with blood group

S.N.	Date	Name of the Blood Bank	No of Bottle/ Unit Collected	Participants			Remark, if any
				Male	Female	Total	
1 st camp							
2 nd Camp							

c. P.P.I. Campaign participation:

S.N.	Date	Name of the Area	Participants			No of beneficiaries
			Male	Female	Total	

d. Programme organized related to Health- health checking camp/ detection camp/ any other health campaign- Health/Eye /T.B./ Malaria / Thalassimia/ etc.

S.N.	Date	Name of the programme	Participants			No of beneficiaries
			Male	Female	Total	

6. Information on the organization of any other activity/workshops State/National level or any other collaborative programmes, if any conducted during the year:

Sr. No.	Name of the Programme	Activities / Work done in brief	Date & Venue of the Programme	No. of vol. participated		
				Male	Female	Total
	Self Defence					

7. Information on participation of NSS Volunteers in various State / Regional / National level programmes, if any during the year:

Sr.	No of Volunteers participated			Date / Period of programme	Nature of Programme	Organiser / Venue of the Programme
	Male	Female	Total			

8. MUNIJAN- Maharashtra Universities New Initiative for Joint Action Now
 Name of the Adopted Village under MUNIJAN- _____ Tal- _____ Dist _____
 Description of the conducted: _____

9. HIV/AIDS activities- RED RIBBON CLUB:

Name of the area / venue of the Campaign : _____
 Total No. of NSS Volunteers participated : _____
 Total No. of Beneficiaries : _____
 Activities description:

10. Disaster Management activities:- Disaster Management Cell:

Name of the area / venue of the Campaign : _____
 Total No. of NSS Volunteers participated : _____
 Total No. of Beneficiaries : _____
 Activities description:

11. Road Safety Campaign :- Activity conducted:-

Campaign organised: _____, Rally _____, Exhibitions: _____, Street Plays: _____,
 Posters: _____, Essays: _____, Slogans: _____, Workshops: _____,
 Lectures: _____
 Any Other, Specify, _____

12. Any other activity not covered above- Please give details

College Seal