 

**Expression of Interest**

 The “Expression of Interest” is invited from the Shilp Gurus, National Awardees, National Merit Certificate Holders, State Awardees of Handicrafts & Handlooms, Self Help Groups under Baba Saheb Ambedkar Hastshilp Vikas Yojana for participation in Indian Handicrafts & Gift Fair(Spring), 2016 w.e.f. 20.02.2016 to 23.02.2016 at Ground Floor, India Expo Mart Expressway, Greater Noida at a nominal facilitation charges. The necessary application forms and Terms of References may be collected from the Council of Handicrafts Development Corporations, West Block No. 7, R.K. Puram, New Delhi on any working day or may be downloaded from Council’s website [www.cohands.in](http://www.cohands.in). The selection of participation will be subject to availability of space and approval of the Chairman(Cohands). The last date for submission of Expression of Interest is 15 days from the date of publishing the same.

**COUNCIL OF HANDICRAFTS DEVELOPMENT CORPORATIONS**

**Application Form for allotment of stalls for participation in ThE Indian Handicrafts and Gift Fair (Spring) 2016, India Expo Mart Ltd. (IEML), Expressway, Greater Noida w.e.f. 20.02.2016 to 23.02.2016, for Federation of Self Help Groups/ Self Help Groups under Baba Saheb Ambedkar Hastshilp Vikas Yojana and Enterpreneur**

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| --- | --- | --- | --- |
| 1. | Name and Address of the Federation of Self Help Groups/ Self Help Groups under Baba Saheb Ambedkar Hastshilp Vikas Yojana | : |  |
| 2. | Name of the contact person and his Telephone No., Fax No. and E-mail id of the Federation of Self Help Groups/ Self Help Groups under Baba Saheb Ambedkar Hastshilp Vikas Yojana | : |  |
| 3. | Attested copy of Registration certificate, copies of bye-laws, 3 year annual accounts duly certified by CA, list of Members, Bank Account with copy of Pass Book in case of SHG’s under AHVY. | : |  |
| 4. | Nature of the Product to be displayed.Photographs of the product to be attached. [Should make a presentation before Chairman(Cohands)] | : |  |
| 5. | Product Range  | : |  |
| 6. | IEC No. & Date | : |  |
| 7. | Details of earlier participation in the International Fairs | : |  |
| 8. |  No. of participation in the International fair under COHANDS stalls, year wise  | : |  |
| 9. | Total sales made during the International fair (Certificate of C/A should be enclosed) | : |  |
| 10. | Entrepreneur should have at least 5 years in the field of Handicrafts with minimum domestic or export of Handicrafts sales of Rs.5.00 lakhs per annum for which certificate of chartered accountant should be given. |  |  |
| 11. | Are you a member of Cohands. If not please forward membership application along with a demand draft of Rs.2,500/- towards membership charges. Application form can be downloaded through our website i.e. [www.cohands.in](http://www.cohands.in) |  |  |
| 12. | Demand draft of Rs.10,000/- in favour of **“Council of Handicrafts Development Corporations”** on account of facilitation charges Demand draft No. and DateAmount |  |  |

NOTE: **Chairman (Cohands) hav**e full right to terminate/ reject any application without giving any reason thereof.

Contact Person: Mr. Mahipal Singh, UDC, COHANDS Mobile No. 09868338578, 011-26174198

Date: \_\_\_\_\_\_\_\_ \_\_

Place: \_\_\_\_\_\_\_\_\_\_

**(Signature)**

**COUNCIL OF HANDICRAFTS DEVELOPMENT CORPORATIONS**

**Application Form for allotment of stalls for participation ThE Indian Handicrafts and Gift Fair (Spring) 2016, India Expo Mart Ltd. (IEML), Expressway, Greater Noida w.e.f. 20.02.2016 to 23.02.2016, for Shilp Guru’s, National Awardees, National Merit Certificate Holders and State Awardees**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Name and Address of the Awardee | : |  |
| 2. | Contact No., Fax No. and E-mail id of the Awardee | : |  |
| 3. | **Category and year of the Award** [Copy of the award certificate along with copy of I.D. Card issued by the O/o DC(Handicrafts) should be enclosed.] | : |  |
| 4. | Nature of the Product to be displayed.Photographs of the product to be attached. [**Should make a presentation before Chairman(Cohands)**] | : |  |
| 5. | Product Range  | : |  |
| 6. | IEC No. & Date | : |  |
| 7. | Details of earlier participation in the International Fairs | : |  |
| 8. |  No. of participation in the International fair under COHANDS stalls, year wise  | : |  |
| 9. | Total sales made during the International fair (**Certificate of C/A should be enclosed**) | : |  |
| 10. | Are you a member of Cohands. If not please forward membership application along with a demand draft of Rs.2,500/- towards membership charges. Application form can be downloaded through our website i.e. [www.cohands.in](http://www.cohands.in)  |  |  |
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Contact Person: Mr. Mahipal Singh, UDC, COHANDS Mobile No. 09868338578, 011-26174198

Date: \_\_\_\_\_\_\_\_ \_\_

Place: \_\_\_\_\_\_\_\_\_\_

**(Signature)**