



**NATIONAL COUNCIL FOR PERSONS WITH DISABILITIES  
REGISTRATION FORM FOR ORGANIZATIONS, INSTITUTIONS AND ASSOCIATIONS**

<b>SECTION C cont...</b>							
<b>C05</b>	What is the organization's current workforce ?	Paid workers			Unpaid workers		
		Males	Females	Males	Females		
<b>C06</b>	How many persons with disability does the organization currently engage as workers?	Paid workers			Unpaid workers		
		Males	Females	Males	Females		

**SECTION D: FUNDING**

<b>D01</b>	What is the organization's main source of funding ? 1 = GoK/Local Authority                      2 = International Agencies 3 = Member subscription                      4 = Private Organizations 5 = Faith Based Organizations                      6 = Private Individuals 7 = Other (Specify) ..... <span style="float: right; border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></span>							
<b>D02</b>	Indicate the various types and sources of support received by the organization during the last 3 calendar years, i.e. 2004-06 (Tick accordingly)							
	<b>Type of support</b>	<b>Support provider</b>						
		GoK or Local Authority	Internatio nal Agency	Member Subscrip tions	Private Organizati on	FBO	Private Individual	Other
	Money grants							
	Training							
	Assistive devices							
	Operational equipment							
	Scholarships							
	Other							
<b>D03</b>	What was the organization's total budget for PWD activities in the last calendar year?						KSh. ....	

<b><u>Comments from the field</u></b>		
..... ..... ..... Signed: ..... <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 10%;"> <span>(Name)</span> <span>(Signature)</span> <span>(Date)</span> </div>		
<b><u>Office comments</u></b>		
..... ..... ..... Signed: ..... <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 10%;"> <span>(Name)</span> <span>(Signature)</span> <span>(Date)</span> </div>		