

Quarterly Report submitted by Child Welfare Committee

District: Chatra Address: SGSY Building, Behind New Court Compound, Chatra	Reporting Period / Quarter From: <u>January 2015</u> To: <u>March 2015</u>	Report Submitted on <u>07th April, 2015</u>
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1. Constitution of CWC

S. No.	Name	Designation	Tenure	Qualification / Previous Training or Special Knowledge in JJ System
1.	MinhaJul Haque	Chairperson	From: 07th Oct 2013 To: 06th Oct 2016	M.A. in History & M.A. in Urdu, Six times training has been taken in Ranchi, Chatra, Lucknow (2 times)
2.	Narmdeshwar Singh	Member	From: 07th Oct 2013 To: 06th Oct 2016	M.A., LL.B. Three times training has been taken at Ranchi, Kucknow and Bhubneshwar
3.	Mahabir Sahu	Member	From: 07th Oct 2013 To: 06th Oct 2016	M.A., One time training has been taken at Ranchi
4.	Jyoti Jha	Member	From: 07th Oct 2013 To: 06th Oct 2016	M.A. Six times training has been taken at Ranchi, Lucknow and Chatra
5.	Hari Shankar Jha	Member	From: 07th Oct 2013 To: 06th Oct 2016	M.A., Five times training has been taken at Ranchi & Chatra

2. Honorarium

2.1 Chairperson

Per sitting :- 350/-

Paid up to (date) :- March, 2014

2.2 Members

Per sitting ₹:- 350/-

Paid up to (date) :- March, 2014

3. Sittings of the CWC

3.1 Scheduled Sittings (Tick where appropriate)
required

Daily | Twice in a week | Weekly | Any Other (Specify):- 3 Days in a week & as and when

3.2 Duration (Tick where appropriate)

Full Day | Half day:- As per requirement (Normally Four Hours)

3.3 Premises (Tick where appropriate)

Inside the Children's Home | Outside the Children's Home

3.4 Raised Platform used by the CWC

Yes | No

3.5 Total Number of sittings before the Quarter:-

36 Days

3.6 Number of Sittings attended by

Chairperson:- 36 Days

Member-1:- 36 Days

Member-2:- 36 Days

Member-3:- 36Days

Member-4:- 36Days

4. Tenure of the CWC

From:- 07th October 2013

To:- 16th October 2016

5. Staff of the CWC

(Mention only those who are exclusively working for the CWC)

Name :-	Designation:-	Contact Number:-
<u>NIL</u>	<u>NIL</u>	<u>NIL</u>

6. Infrastructure available with the CWC

(Tick where appropriate)

- a. Board Room Yes | **No**

- b. Waiting room for the child in need of care and protection Yes | **No**

- c. Waiting room for Parents/ Visitors Yes | **No**

- d. Room for Chairperson and Members **Yes** | No

- e. Record Room Yes | No
- f. Room for Welfare Officer Yes | No
- g. Working Computer Yes | No
- h. Drinking water Yes | No
- i. Toilet facilities Yes | No
- j. Typist/Photocopy etc for Child/Parent in the vicinity Yes | No

7. Lawyers and Counselors provided for children produced before the CWC by the Legal Services Authority

7.1 Number of Lawyers:- NIL Number of Cases Referred:- NIL

7.2 Number of Counselors:- NIL Number of Cases Referred:- NIL

8. Status of Cases

S.No.	Number of Fresh cases and Pendency	Girls	Boys	Total
1.	Number of CNCP pending cases before CWC as on 1 st Day of the quarter	=	=	=
2.	Number of New/Fresh CNCP cases brought before the CWC during the quarter	<u>2</u>		
3.	Number of CNCP cases disposed of by the CWC during the quarter	<u>2</u>		
4.	Number of CNCP cases pending before the	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>

CWC as on last day of the quarter			
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9. Details of Disposal of Cases

9.1

Sl. No.	Category	Pendency from the Previous Quarter		Fresh Cases during the Current Quarter		Total case in current Quarter	Cases disposed off during the Quarter			Nature of Disposal							
		M	F	M	F		M	F	Total	Restored to Family	Transferred	Declared Legally free fro adoption	Foster Care	Sponsorship	Institutional Care	After Care	Any other
1.	Missing/ Runaway																
2.	Orphaned																
3.	Abandoned																
4.	Surrendered																
5.	Street children																
6.	Child labourers				1	1		1	1	1							
7.	Child beggars																
8.	Trafficked victims																

9.	Children with Mental Disabilities																
10.	Children with Physical Disabilities																
11.	AIDS/HIV affected																
12.	Victims of CSA																
13.	Incapacitated parents																
14.	Children affected by disasters																
15.	Children affected by civil unrest																
16.	Refugee children																
17.	Children of commercial sex workers																
18.	Children of prisoners																
19.	Any other (give details)				1												

* M – Male

F – Female

CSA – Child Sexual Abuse

S. No.	Orders passed	Girls	Boys	Total	Number of cases where Individual Care plan was prepared
1.	Number of children restored to their family during the quarter	<u>20</u>		<u>20</u>	
2.	Number of children sent to Shelter Home				
3.	Number of children sent to State Adoption Agency				
4.	Number of children sent to other Districts				
5.	Number of children sent to other States				
6.	Number of children placed in a children's home until completion of 18 years of age				
7.	Number of children placed with a fit institution				
8.	Number of children placed with a fit person				
9.	Number of children placed in a children's home for mentally challenged				
10.	Number of children referred for Sponsorship				
11.	Number of children referred for pre-adoption foster care				
12.	Number of children referred for foster care placement				
13.	Any other, give details				

9.2 Details of Orders Given

9.3 Children declared "Free for adoption"

S. No.	Orders Passed	Girls	Boys	Total	Remarks
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1.	Number of inquiries pending from the previous quarter	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>
2.	Number of children declared "free for adoption" during the current quarter	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>
3.	Number of inquiries carried forward to the quarter	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>

10. Training of members

S. No.	Topic	Organized by	Attended by	Date and Days	Remarks
<u>NIL</u>	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>	<u>NIL</u>

11. Complaints/ Suggestion, if any, Received and Action taken [Please attach a separate sheet, if necessary]

There is no support available to CWC from government agency and other sources

12. Remarks / Suggestion by CWC [Please attach a separate sheet, if necessary]

a. Chairperson _____

b. Member-1 _____

c. Member-2 _____

d. Member-3 _____

e. Member-4 _____

Signed by

Chairperson _____

Member-1 _____

Member-2 _____

Member-3 _____

Member-4 _____