

April 2015th to June-2015

Case Monitoring Sheet for CWCs

(NOTE: PLEASE ATTACH A SEPARATE SHEET IF NECESSARY)

STATE: Jharkhand

Child Welfare Committee, District: DHANBAD

Case Number	Chairperson of the CWC / Member of CWC specifically dealing with the case

1. Details of Child Separate Sheet Attach here with

1.1 Name: _____

Sex _____

1.2 Age: _____ as per _____

Documentary Evidence _____

[Document relied upon] _____

Or,

Medical examination _____

[Date and Name of Ho _____]

1.3 Place where child was found and date:

Parent /Guardian	Present Address and Contact Number	Permanent Address

1.5 Whether child suffers from any disability

- Hearing impairment
- Speech impairment
- Visual impairment
- Mental retardation
- Mental illness
- Mentally challenged
- Any other (please specify) _____

2. Pre-production2.1 *Suo motu* cognizance taken [Yes/No]

2.2 Date and Time by which information on the child was received by the CWC _____

2.3 Source of Information, with details: (name, address, phone number, e-mail) _____

3. Production3.1 Date and Time of Production
_____3.2 Produced by (name, address, phone number, e-mail)

3.3 Whether child was produced before an individual Member of the CWC

☐

No

Yes

☐

Name of Member _____

3.4 Members present at the time of Production

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

3.5 Report submitted by person/institution producing the child before the CWC [Yes/No] _____

4. Details of CNCP

4.1 (Tick where appropriate)

Homeless | Abandoned Child | Orphan | Missing/Run away Child | Found
Begging | Victim of Sexual Abuse | Street Child | Trafficked Child | Child
affected by Substance or Drug Abuse | Victim of Natural Calamities |
Victim of Civil Unrest | Incapacitated Parents | Mentally challenged |
Physically challenged | Child suffering from Terminal Diseases | AIDS/HIV
infected or affected | Child of Prisoners | Refugee Child | Child of
Commercial Sex Worker | Any other (Specify)

4.2 Offences against the child, if any

U/s _____

4.3 FIR registered prior to production [Yes/No]

4.4. FIR registered after production on directions from CWC [Yes/No]

4.5 Date of FIR

4.6 Police Station

4.7 Sections under which FIR is registered

4.8 Legal aid provided [Yes/No], with complete details of legal aid lawyer

4.9 Counseling provided [Yes/No], with complete details of counselor

4.10 Support person provided for cases under POCSO (name, address,
phone number, e-mail)

5. Pre-Inquiry Orders

Date of Order _____ Signed by _____

Type of Order

(Tick where appropriate)

- Sent to shelter home

Name, Address, phone number and e-mail

- Sent to adoption agency

Name, Address, phone number and e-mail

- Sent back home

Residential Address

- Transferred to another CWC

Name, Address, phone number and e-mail

- Sent to a children's home until further orders

Name, Address, phone number and e-mail

- Placed with a fit person

Name, Address, phone number and e-mail

- Placed with a fit institution

Name, Address, phone number and e-mail

- Placed with an institution for mentally challenged or any other institute for people with disability

Name, Address, phone number and e-mail

- **Any Other (Specify with Date of Order, Name, Address, phone number and e-mail)**

6. Inquiry

6.1 Date on which Inquiry by Welfare Officer or Voluntary organization was ordered _____

6.2 Date of submission of Inquiry report

6.3 SIR prepared by Welfare Officer or Voluntary Organization as part of their Inquiry

(Yes/No) _____

6.4 Home Visit made as part of SIR (Date and Name of the Person)

6.5 Name of the Welfare Officer or Voluntary Organization submitting the Inquiry report _____

6.6 Date on which CWC completed its Inquiry

7. Post-Inquiry Orders

7.1 Date of Order _____ Signed by

7.2 Type of Order

(Tick where appropriate)

- Sent to shelter home

Name, Address, phone number and e-mail

- Sent to drop-in centre

Name, Address, phone number and e-mail

- Sent to adoption agency

Name, Address, phone number and e-mail

- Restored to family

*Name of Parent/Guardian and
Address*

- Transferred to another district

Details

- Transferred to another state

Details

- Placed in a children's home until completion of 18 years of age
- Placed in a children's home until completion of trial in the court or recording of evidence and cross examination of the child victim
- Placed with a fit person

Name, Address, phone number and e-mail

- Placed under supervision with a fit institution

Name, Address, phone number and e-mail

- Placed with a children's home for mentally challenged

Name, Address, phone number and e-mail

- Sponsorship
- Pre-adoption foster care

Name, Address, phone number and e-mail

- Foster Care placement

Name, Address, phone number and e-mail

8. Transfer

8.1 Date of transfer order _____ Date of actual transfer _____

8.2 Whether child escorted by

- Welfare Officer
- Childline
- Police
- Social Worker from NGO
- Any Other (Specify)

9. Adoption

9.1 Non-traceable report submitted to CWC by Police [Yes/No] _____

Date of Submission _____

9.2 Child declared abandoned [Yes/No] _____

Order dated: _____ Signed by _____

9.3 Pre-surrender counseling of parent by CWC [Yes/No] _____

Date _____ Place _____

Counseling by _____

9.4 Surrender Deed [Yes/No] _____

Date _____ Signed by _____

9.5 Declaration of child as surrendered child [Yes/No] _____

Date _____ Signed by _____

9.6 Report received from adoption agency [Yes/No] _____

Date _____ Name of Agency _____

9.7 Child declared legally free for adoption [Yes/No]

Order dated _____ Signed by _____

10. Periodic Review

10.1 Case file of child maintained as per Rules [Yes/No]

10.2 Individual Care Plan prepared [Yes/No]

10.3 Quarterly review of child as per individual care plan [Yes/No]

11. Details of Review of Placement / Supervision / Restoration Orders

Type of Order	Period for which the Order is applicable	Periodic Review (Dates Required)
Shelter Home	From To	
Children's Home	From To	
Fit Institution	From To	
Fit Person	From To	
Adoption Agency	From To	
Foster Care	From To	
Restored to family under Supervision Orders	From To	

12. Action taken on the basis of review

(Tick where appropriate)

- Counseling
- Psychotherapy
- Admission into nearby school

Name, address, phone number and e-mail of school _____

- Enrollment for vocational training

Name, Address, phone number and e-mail of Vocational Training Centre _____

Course taken

- Continuation of education through Open school
- Sports coaching

Name of

Sport _____

Name, Address, phone number and e-mail of Coaching Centre _____

- Drugs and substance abuse de-addiction programme

Name, Address, phone number and e-mail of De-addiction and/or Rehab Centre

- Continued Supervision by Welfare Officer or Voluntary Organization even after restoration to family

Name of Welfare Officer or Voluntary Organization _____

- After care
- Any other (please specify)

Quarterly Report submitted by Child Welfare Committee

District: <u>Dhanbad</u> Address: <u>Hem Tower, L.C. Road</u> <u>P.O. Dist - Dhanbad</u>	Reporting Period / Quarter From <u>April-2015</u> to <u>June-2015</u>	Report Submitted on
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1. Constitution of CWC

S. No.	Name	Designation	Tenure	Qualification / Previous Training or Special Knowledge in JJ System
1.	Nita Sinha	Chairperson	From <u>Oct-2013</u> to <u>Next Three Yrs.</u>	M.A, BEd
2.	Sudipkr Gupta	Member	From <u>Oct-2013</u> to <u>Next 03 Years</u>	B.A (H), LLB.
3.	Devedra Sharma	Member	From <u>Oct-2013</u> to <u>Next 03 Years</u>	B.A (H) LLB
4.	Premy Khator	Member	From <u>Oct-2013</u> to <u>Next 03 Yrs.</u>	M.A LLB
5.	Shankar Ranjan	Member	From <u>Oct-2013</u> to <u>Next-3 Yrs.</u>	M.A (H)

2. Honorarium

2.1 Chairperson

Per sitting ₹ 500/- X 12

Paid up to (date) November - 2014

2.2 Members

Per sitting ₹ 500/- X 12

Paid up to (date) November - 2014

3. Sitings of the CWC

3.1 Scheduled Sitings (Tick where appropriate)

3.2 Duration (Tick where appropriate)

Daily | Twice in a week | Weekly | Any Other (Specify) _____
Full Day | Half day ☒

3.3 Premises (Tick where appropriate)

3.4 Raised Platform used by the CWC

Inside the Children's Home | Outside the Children's Home ☒
Yes | No ☒

3.5 Total Number of sittings before the Quarter

☒ 68

3.6 Number of Sitings attended by

Chairperson ☐ 66

Member-1 ☐ 68

Member-2 ☐ 68

Member-3 ☐ 68

Member-4 ☐ 68

4. Tenure of the CWC

From Oct - 2013

To Next 03 Year

5. Staff of the CWC

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

Name	Designation	Contact Number

6. Infrastructure available with the CWC

(Tick where appropriate)

a. Board Room	Yes		No <input checked="" type="checkbox"/>
b. Waiting room for the child in need of care and protection	Yes		No <input checked="" type="checkbox"/>
c. Waiting room for Parents/ Visitors	Yes		No <input checked="" type="checkbox"/>
d. Room for Chairperson and Members	<input checked="" type="checkbox"/> Yes		No <input checked="" type="checkbox"/>
e. Record Room	Yes		No <input checked="" type="checkbox"/>
f. Room for Welfare Officer	Yes		No <input checked="" type="checkbox"/>
g. Working Computer	Yes		No <input checked="" type="checkbox"/>
h. Drinking water	Yes		No <input checked="" type="checkbox"/>
i. Toilet facilities	Yes		No <input checked="" type="checkbox"/>
j. Typist/Photocopy etc for Child/Parent in the vicinity	Yes		No <input checked="" type="checkbox"/>

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

7.1 Number of Lawyers	00	Number of Cases Referred	00
7.2 Number of Counselors	00	Number of Cases Referred	00

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				1	1	2
2.	Number of New/Fresh CNCP cases brought before the CWC during the quarter				32	32	64
3.	Number of CNCP cases disposed of by the CWC during the quarter				32	32	64
4.	Number of CNCP cases pending before the CWC as on last day of the quarter				00	00	00

9. Details of Disposal of Cases

9.1

S. No.	Category	Pendency from the previous quarter			Fresh cases during the current quarter			Total cases in current quarter			Cases disposed of during the current quarter			Nature of Disposal						
		M	F	Total	M	F	Total	M	F	Total	M	F	Total							
1.	Missing/ Runaway	00	00	16	14	-	-	-	-	-	-	-	-	Restored to family	33		00	00	00	01
2.	Orphaned	00	00	00	00	00	00	00	00	00	00	00	00	Transferred	06		00	00	00	01
3.	Abandoned			00	01	01	01	00	01	01	00	01	01	Declared legally free for adoption	-		00	00	00	-
4.	Surrendered	00	00	00	00	00	00	00	00	00	00	00	00	Foster Care	00		00	00	00	00
5.	Street children	00	00	00	00	00	00	00	00	00	00	00	00	Sponsorship	00		00	00	00	00
6.	Child labourers	00	00	00	00	00	00	00	00	00	00	00	00	Institutional Care	07		00	00	00	00
														After Care	-		-	-	-	-
														Any Other	-		-	-	-	-

7.	Child beggars	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00
8.	Trafficked victims	00	00	00	05	05	00	05	05	05	05	05	05	05	05	05	05	05	05
9.	Children with Mental Disabilities	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10.	Children with Physical Disabilities	—	—	00	01	01	00	01	01	01	01	—	—	—	—	—	—	—	—
11.	AIDS/HIV affected	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12.	Victims of CSA	00	00	00	06	06	00	06	06	06	06	—	—	—	—	—	—	—	—
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) <i>Education</i>	00	00	00	03	04	01	03	04	04	04	—	—	—	—	—	—	—	—

* M - Male

F - Female

CSA - Child Sexual Abuse

20. Any other -

02- Child marriage + 08 Domestic violence

9.2 Details of Orders Given

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	23	27	50	
2.	Number of children sent to Shelter Home	03	07	10	
3.	Number of children sent to State Adoption Agency	00	00	00	
4.	Number of children sent to other Districts	04	01	05	
5.	Number of children sent to other States	04	02	06	
6.	Number of children placed in a children's home until completion of 18 years of age	00	00	00	
7.	Number of children placed with a fit institution	00	00	00	
8.	Number of children placed with a fit person	00	00	00	
9.	Number of children placed in a children's home for mentally challenged	02	00	02	
10.	Number of children referred for Sponsorship	00	00		
11.	Number of children referred for pre-adoption foster care	00	00		
12.	Number of children referred for foster care placement	00	00		
13.	Any other, give details	00	00		

9.3 Children declared "Free for adoption"

S. No.	Orders Passed	Girls	Boys	Total	Remarks
1.	Number of inquiries pending from the previous quarter	00	00	00	
2.	Number of children declared "free for adoption" during the current quarter	00	00	00	
3.	Number of inquiries carried forward to the quarter	00	00	00	

10. Training of members

S. No.	Topic	Organized by	Attended by	Date and Days	Remarks
4					

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

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-2 Sudip Kr Gupta

Member-4 Shamkr Rautani

Member-1 _____

Member-3 _____

Priyanshu Sharma
Priyanshu Sharma

June - 2015

Sl No.	Case No.	Name of Child	Sex	Age	Father's Name/ Mother's Name	Address	Found	Send to	Date	Related Category
1	103/15	Prem Kr Paswan	M	13	Raju Paswan	Dharu Dharbad	Randi	Dharu F Dharbad	1/6/15	Runaway
2	104/15	Amar Kr	M	10	2t Suresh Kr	Katras	Dharbad	Katras F	5/6/15	Runaway
3	105/15	Panku Kumar	M	12	Nandu Band	Enayef Bhuu Chandl	Dharbad	UP Chandl F	8/6/15	Runaway
4	106/15	Nisha Kumari	F	2 1/2	Umesh Paswan	Loyabadi - Bajura	Dharbad	Loyabadi F	9/6/15	Waste help
5	107/15	Carshan Kuna	F	10	Lipman Saw	Dharbad Balliepur	"	Balliepur Sandra F	9/6/15	Rabec
6	108/15	Mungul Kumar	M	13	John Baski	Simalataad	Randi	Simalataad Bazwala F	10/6/15	Runaway
7	109/15	Raja Bhuiya	M	12	Jat Kaler	Dharbad Station	Randi	Simalataad Station F	10/6/15	Runaway
8	110/15	Rajendra Saw	M	10	Suresh Saw	Gandhi Nager	Dharbad	Gandhi Nager F	14/6/15	Runaway
9	111/15	Raia	F	12	Ummanu	Ummanu	Nisha	M.T. Nishan Cherity	15/4/15	Runaway
10	112/15	Jamira Khatun	F	12	Jaker	Motihari (Bajura)	Shia Ban	P.K. A Bajura	16/6/15	Runaway
11	113/15	Chaban Lal Kr	M	10	Lala Bhuiya	Simelich Keta	Dharbad	Simelich Keta F	17/6/15	Child Labor
12	114/15	Kumar	M	09	"	"	"	"	17/6/15	"

[illegible]

May 2015

Sl No.	Case No.	Name of Child	Sex	Age	Father's Name/ Mother's Name	Address	Found	Send to	Date	Related Category
01	84/15	Tarlesh Kumar	M	16	Kartik Mahato	Kandua Bath Mahuda, Dhanbad	Dhanbad	Mahuda - F	02.05.15	Need Educator
02	85/15	Monika Hembram	F	15	Danijal Hembram	Salega, P.O. Bantla Chandmali, Jamui Bihar	"	Jamui, Bihar F	05.05.15	Rumug
03	86/15	Pradeep Singh	M	12	Kusharantjan Singh	P. medinipur	"	P.K. N. F F	05.05.15	Rumug
04	87/15	mand Budhi Chiral	F	14	Apam Unknown	Apam Unknown	"	Gicam Sanstha Westakela	05.05.15	Rumug
05	88/15	Rupa Kumar	F	12	Ramashis Chohan	Kareja, Ritai Nagra	"	Nagra F	06.05.15	Rumug
06	89/15	Tiji Kumar	F	13	Late. Kamashree Soni	Acharpati, STI Ramnagar Chandman, Dhanbad Dhanbad	"	Dhanagar F Dhanbad	09.05.15	Penny
07	90/15	Pintu Kumar	M	16	Haredeo Bhunya	Kusunde Dhanbad	Patna	Chitli R	12.05.15	Child Labor
08	91/15	Dipak Kumar	M	12	Nagashree Bhunya	Orphan	Patna	Dhanbad - F	12.05.15	Child Labor
09	92/15	Rahul Kumar	M	14	Lae Rohan Bhuya	Orphan	"	Dhanbad F	12.05.15	"
10	93/15	Nico born baby	F	14-15	Orphan	Orphan	Dhanbad	Pat Medar Tenua Dhanbad	12.05.15	Abandon Child
11	94/15	Karnaljit Singh	M	24-28	mandip Katar	H.C. married	Dhanbad	Dhanbad - F	15.05.15	Welfare Domestic violence
12	95/15	Durga Kumar	F	10	Sundera Padi	Lodna Kharpe Dhore	Dhanbad	Lodna - F	21.05.15	Rape case

[illegible]

April 2015

Sl No.	Case No.	Name of Child	Sex	Age	Father's Name/ Mother's Name	Address	Found	Send to	Date	Related Category
1	61/15	Chanchini	F	9	Mungel	Chhabad station	Chimney	P.K.A F	6.4.15	Runaway
2	62/15	Meera	F	5	Kaller	"	"	" F	"	"
3	63/15	Roni	F	10	Kaller	"	"	" F	"	"
4	64/15	Katrash child Report			Katrash	Katrash		Katrash	8.4.15	Katrash as Hatched
5	65/15	Ranju Kumar	F	17	Chate Lal Yadav	Garga Shapur	Chhabad	Garga F	9.4.15	Runaway
6	66/15	Shanti Ky	F	16	Jumal Kumar	Sindlega	Chhabad	Sindlega F	"	Trafficking
7	67/15	Kushwaha	F	15	Shiva Kumar	Siliguri	Chhabad	" F	"	"
8	68/15	Rakhi Kumar	F	11	Cropal Rajwar	Dumra,	Chhabad	Dumra F	10/4/15	Education
9	69/15	Karan Bansari	M	4	Bevi Bansari	Chothai Kalli non-10	"	Chothai Kalli non-10 F	11/4/15	domestic violence
10	70/15	Pinkys Kumar	F	16	Saam Sphura	Chigodher Chhabad	UP	Chigodher F	13/4/15	trafficking child marriage
11	71/15	Gadha Bansari	F	10	M. Mohan	Puthi	Chhabad	Puthi F	16/4/15	Repe case
12	72/15	Savitra W.	F	16	Chand Kallandi	Bara Chhabad	"	Bara F	16/4/15	Runaway

Sl No.	Case No.	Name of Child	Sex	Age	Father's Name/ Mother's Name	Address	Found	Send to	Date	Related Category
13	73/15	Laxman K	F	17	Chandra Kumar	Barera	Barera Chandra Kumar	16/4/15	Barera Chandra Kumar	Barera Chandra Kumar
14	74/15	Bemi Malik Pranod K	M	14	Sitalant Malik Lakhan Yadav	Sachikela "	missed missed	missed missed	17/4/15	missed missed
15	75/15	Suman Sani	F	16	Ram Kumar	Sodipatak	missed	Sodipatak F	"	Violence
16	76/15	Sandali Paurani Kopale Paurani	F	15	Padma Paurani	Nirsha	"	Nirsha F	"	Needly
17	77/15	Dharmadhar Singh	M	15	Chandran Singh	Tundi	missed	Tundi - F	17-4-15	Admission
18	78/15	Sahelo Vishwanath	M	11	Haru Sahdeo	Saraidela Bagula Bari	"	Saraidela F	17-4-15	Barera
19	79/15	Pouri K Sani	M	14	Sanjay Sani	Mahuda	"	Mahuda F	18-4-15	Admission
20	80/15	Kishor Adhara	F	14	Rubai Lal Kishor	Saraidela Bemajpur	"	missed	18-4-15	missed
21	81/15	Mandabadi	F	14	Unkumar	Unkumar	"	MT charity name	19-4-15	missed
22	82/15	ishita Mandabadi	F	8	Saty Shakti Mandabadi	Harijan Bari Nirsha	"	Nirsha F	20/4/15	Mandabadi
23	83/15	Pranod Piyari	M	7	M.D Raj Ansari	Rabaris	"	Rabaris F	25/4/15	concealing