



Livelihoods Action Plan
(make separately for main and additional activities) Use extra sheets if required)

Name of the member:

Village/Block:

Name of FO:

Date & Month of LAP commencement:

A. Main Activity :

B. Additional Activity (if any)

1. Technical Feasibility:

a. Backward Linkages: (like vet care; fodder, soil/irrigation/seed/raw material etc.,)

b. experience:

c. training inputs required:

1. Economic viability:

i. Forward linkages like market; value addition etc.,

ii. Costs and Benefits:

iii. Household income Before and after proposed new Livelihoods activity cycle incremental income

2. A. Gestation Period: (for one cycle)..... months B. income generation cycle

(daily/weekly/fortnightly/monthly/annually):

4. Total Investment:

a. From member as down payment

b. From Project

c. others (specify)

Total

Rs.

Rs.

Rs.

Rs.

5. Asset Protection costs (like insurance) and details:

6. Working capital stipend totally recommended: Rs.

7. Release schedule:

| Release stanch | Purpose | Purpose | | Remarks |
|----------------|---------|------------|-------------------------|---------|
| | | Main grant | Working capital stipend | |
| I Release | | | | |
| II Release | | | | |
| III Release | | | | |
| Total | | | | |

9. No., of family members engaged:

10. Comment on prevention from collateral damage in the shape of child labor and how do you ensure it?

Above LAP is prepared by me in consultation with the UPP member household:

Signature of the FO

LAP is approved with following remarks: Signature of BO:

signature of SFOM:

Date: