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| **DETAILS OF ADOPTER**(Evidences may be sought by the Competent Forum for details covered or not covered in the following areas) | **Adoption request type**(Please tick mark ONE option) | Organization |  | Individual |  | Other |  |
| Name (complete)(Organization / Individual) |  |
| CNIC / Registration #(Copy may be provided) |  |
| Adopter’s mailing address |  | Contact # |  |
| Email ID |  |
| Type of Occupation (Business/Job/Work) |  |
| Educational Qualification(For Individuals) |  |
| Details of past /similar experience esp. for running a school OR an educational institution | If applicable, following should be provided:Name & type of institution, duration of intervention, scope of work, activities undertaken, challenges faced and strategies adopted to overcame them |  |
| Motivation/Reason for adoption through AASP |  |
| Brief Work plan (if developed, may be attached)  |  |
| Sources of funding and sustainability (Existing & planned) |  |
| Focal person for School Adoption (and for AASP) along with contact info |  |