

Notification

83-1-2020-21/SDB/4032

The Government of Goa is pleased to make the following scheme and is hereby published for general information of public, which shall come into force from the date of publication in the Official Gazette.

By order and in the name of the Governor of Goa.

Umeshchandra Joshi, Director & ex officio Jt. Secretary (Social Welfare).

Panaji, 9th November, 2021.

**MUKHYAMANTRI DEV DARSHAN YATRA
YOJANA**

1. *Objective of the Scheme.*— In today's hectic life struggle the people have very little time for themselves and their families. It is only the religious and godly feelings that sometimes individuals devote some moments in peace and happiness. It is believed that by visiting sacred religious places, the individuals get real happiness. However due to their economical condition the wishes of some people remain unfulfilled. The Government of Goa, therefore, endeavored to help such people particularly Senior Citizen to have blessing of the almighty God. The Scheme shall be called "Mukhyamantri Dev Darshan Yatra Yojana".

2. *Scope of the Scheme.*—

a. The scheme envisages to provide one time travel assistance on pilgrimage in a life time to senior citizens to visit sacred holy places outside Goa as per the itineraries decided by the Government of Goa from time to time.

b. The pilgrimage shall be sent under Indian Railways Catering and Tourism Corporation Ltd. (IRCTC) package as per MOU signed by the Government with IRCTC. The pilgrimage tour will be conducted for a group of not less than 750

persons who wish to visit the holy places as per itineraries decided by the Government of Goa from time to time.

3. *Commencement of the Scheme.*— The scheme shall come into force with effect from the date of publication of scheme in the Official Gazette.

4. *Definitions.*—

(i) 'Government' means the Government of Goa.

(ii) 'Director' means the Director of Social Welfare, Government of Goa.

(iii) 'Family' means husband/wife and their dependent children.

5. *Eligibility Criteria.*—

a. The applicant shall be not less than 60 years of age at the time of making application under this scheme.

b. The persons applying under this scheme shall be resident of Goa for at least 15 years certified by Deputy Collector.

c. The annual family income of the applicant shall not exceed Rs. 3.00 lakhs per annum from all sources.

d. The applicant shall be physically and mentally sound to perform the journey and shall not be suffering from any communicable diseases like T.B., Heart diseases, Leprosy, COVID etc. and the same shall be certified by doctor from Health Department, Government of Goa not below the rank of Chief Medical Officer or Health Officer in prescribed format (Annexure-'C') for interstate and (Annexure - 'E') for within state from the concerned area where the applicant resides.

e. Under the Scheme one attendant can accompany the pilgrim as attendant provided that he/she is above the age of 60 years.

f. Preference shall be given to the Husband and Wife provided both of them are Senior Citizens.

6. *Procedure for applying.*— The applications in the prescribed form (Annexure-'A') shall be submitted in the Directorate of Social Welfare, 18th June Road, Panaji-Goa or in the Office of the Deputy Director of Social Welfare, Mathany Saldhana Administrative Complex, Room No. 21, Collectorate South Goa, Margao-Goa with the following documents of the applicant.

(a) Income certificate issued by competent authority showing annual income of the family from all sources.

(b) Residence Certificate of at least 15 years residence in Goa issued by the concerned Mamlatdar/Gazetted Officer of Government of Goa/MLA/MP (Annexure-'B').

(c) Birth Certificate/Proof of age.

(d) A copy of Aadhar Card.

(e) A copy of Election Photo Identity Card.

(f) A copy of Senior Citizen Identity Card issued by Directorate of Social Welfare.

(g) A Certificate issued by Health Officer in prescribed format (Annexure-'C').

7. *Visit of Temples/Churches/Mosques/other places within the State of Goa.*— The scheme shall also provide free transport to Senior Citizens to visit the famous Temples/Churches/Mosques/other places within the State of Goa by the buses through Kadamba Transport Corporation Limited. The routes shall be finalized by the Government in consultation with Kadamba Transport Corporation Limited. Directorate of Social Welfare shall reimburse the transport charges to Kadamba Transport Corporation Limited.

The applicant desiring to avail the benefit shall apply in prescribed application format in Annexure 'D' to Directorate of Social Welfare through the concerned Deputy

Collector. The Deputy Collector shall then forward the application duly recommended to Directorate of Social Welfare for arranging the buses through Kadamba Transport Corporation Limited.

Transport shall be arranged for minimum of 40 Senior Citizens and tour shall be of one day. Senior Citizen are entitled to avail benefit to visit the Temples/Churches/Mosques/other places within Goa irrespective of their income status subject to fulfillment of condition laid under clause 5(b) and 5(d).

8. *Scrutiny/Sanctioning process.*— The application shall be scrutinized by the Scrutiny Committee for the concerned district. The composition of Scrutiny Committee shall be as under:—

North Goa District Scrutiny Committee

1. Deputy Director of Social Welfare..... Chairperson.
2. Assistant Director (Welfare of PwDs)..... Member.
3. District Welfare Officer (North) Member Secretary.

South Goa District Scrutiny Committee

1. Deputy Director of Social Welfare..... Chairperson.
2. Assistant Director (Welfare of PwDs) Member.
3. District Welfare Officer (South)..... Member Secretary.

The Scrutiny Committee shall forward the application to the sanctioning committee. The composition of the sanctioning committee shall be as under:-

1. Hon'ble Minister for Social Welfare..... Chairman.
2. Director of Social Welfare..... Member.
3. Deputy Director of Social Welfare..... Member.
4. Assistant Director (Social Defence Branch)..... Member Secretary.

9. Relaxation and Interpretation.—

(i) The Government shall be the competent authority for relaxing or interpreting any of the clauses/conditions in the scheme.

(ii) The decision of the Government shall be final and binding on all parties.

By order and in the name of the Governor of Goa.

Umeshchandra Joshi, Director & ex officio Jt. Secretary (Social Welfare).

Panaji, 9th November, 2021.

ANNEXURE – 'A'**Form of Application**

(Under Mukhyamantri Dev Darshan Yatra Yojana)

To,
The Director of Social Welfare,
Panaji-Goa.

Photo of the Applicant
attested by a Gazetted
Officer or M.P./M.L.A.
of State Government

Sir,

I, Shri/Smt./Kum. hereby apply for selection for undertaking Tour/
Pilgrimage.

Select the Place of Pilgrimage: / /
..... / /

My particulars are as under:

1. Name:

2. Father's/Husband's Name:

3. Residential Address:

H. No.: Ward:

Village/Town: Constituency:

Taluka:

Nearest Landmark:

4. Date of birth/age:

5. Whether belongs to SC/ST/OBC/Minority/General:

6. Religion:

7. Aadhar card No.:

8. Contact No.:

9. Total Family Income from all sources for the year..... is Rs.
(Rupees..... only).

10. Details of person to be contacted in case of emergency/accident/illness etc.

A) Name of Person:

B) Detail Address:

C) Relationship with the applicant:

D) Contact number:

11. Details of Attendant:

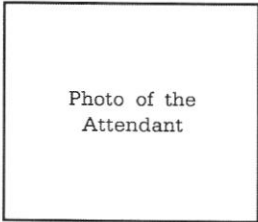


Photo of the
Attendant

a) Name:

b) Father's/Husband's Name:

c) Relation with the Applicant:

d) Residential Address:

House No.: Ward:

Village/Town: Constituency: Taluka:

Nearest Landmark:

e) Date of Birth/Age:

f) Whether belongs to SC/ST/OBC/Minority/General:

g) Religion:

h) Aadhar card No.:

i) Contact No.:

DECLARATION

I, hereby declare that

1. I have not availed the benefit of such scheme sponsored by Government or any other agency in past.
2. I am physically and mentally fit for performing pilgrimage.
3. I am not suffering from any serious ailments, communicable diseases or mental diseases.
4. I shall take care of jewellery and other belongings during the tour and Government shall not be held responsible for any loss or theft of my jewellery and other belonging.
5. The contents mentioned in the application from Sr. No. 1 to 11 are correct to the best of my knowledge and belief and nothing has been concealed therein.
6. If my declaration is proved to be wrong I am liable for all Civil/Criminal action.

Date:

Name:

Signature of the applicant

Documents to be submitted alongwith the application:

1. Income certificate issued by competent authority showing family annual income from all sources for applicant only.
2. Residence Certificate of at least 15 years residence in Goa issued by the concerned Mamlatdar/ /Gazetted Officer of Govt. of Goa/MLA/MP For applicant only. (Annexure 'B').
3. Birth Certificate/Proof of age.

4. A copy of Aadhar Card.
5. A copy of Election Photo Identity Card.
6. A copy of Senior Citizen Identity card issued by Directorate of Social Welfare.
7. A Certificate issued by doctor from Health Department, Government of Goa not below the rank of Chief Medical Officer or Health Officer in prescribed format (Annexure-C) for Applicant and Attendant.

Note: The applicant shall submit self attested documents/photographs and shall produce original documents at the time of submitting the application in the Office of the Directorate of Social Welfare, Panaji and Office of the Deputy Director of Social Welfare, Margao for verification.

ANNEXURE – 'B'

Residence Certificate

(To be signed by Mamlatdar or Gazetted Officer of Government of Goa or MLA/MP)

Certified that Shri/Smt./Kum.
 age years, son/daughter/wife of Shri.....
 residing at House No. situated at Ward Village/Town
 Taluka Goa, for the last years and month since

This certificate is issued at the request of Shri/Smt./Kum.
 for producing the same to the office of Directorate of Social Welfare, Panaji-Goa for availing the scheme
 "Mukhyamantri Dev Darshan Yatra Yojana" for SENIOR CITIZENS.



Signature:
 Name in block letters:
 Designation:
 Address
 (Official):
 Telephone No. (Official):

Place:

Date:

ANNEXURE – 'C'

Medical Certificate for Applicant

(To be issued by Doctor from Health Department not below the rank of
 Chief Medical Officer or Health Officer)

This is to Certify that I have examined Shri/Smt. age
 resident of House No. ward village/town Constituency
 Taluka and declare that he/she is not suffering from any serious ailment,
 communicable diseases, heart diseases etc.

Shri/Smt. is fit to perform journey/pilgrimage under
 "Mukhyamantri Dev Darshan Yatra Yojana".

His /Her Aadhar Card No. is

Photo to be
 attested by the
 Doctor not
 below the rank
 of CMO/HO

Name of Doctor:
 Reg. No.
 Signature of Doctor
 Official Rubber Stamp

Date:

Place:

ANNEXURE - 'D'

Form of Application

(Under Mukhyamantri Dev Darshan Yatra Yojana within the State of Goa)

To,
The Director of Social Welfare,
Panaji Goa.
Sir,

Photo of the
Applicant
attested by a
Gazetted
Officer or M.P./
M.L.A. of State
Government

I, Shri/Smt./Kum. hereby apply for
selection for undertaking Tour to visit temples/Churches/Mosques other places within the State of Goa.

My particulars are as under:

1. Name:
2. Father's/ Husband's Name:
3. Residential Address
H. No.: Ward:
Village/Town: Constituency:
Taluka:
Nearest Landmark:
4. Date of Birth/Age:
5. Whether belongs to SC/ ST/OBC/ Minority/General:
6. Religion:
7. (i) Aadhar Card No.
(ii) Election Card No.
8. Contact No.:
9. Details of person to be contacted in case of emergency/accident/illness etc.
a) Name of Person:
b) Detail Address:
c) Relationship with the applicant:
d) Contact number:

DECLARATION

I, hereby declare that

1. I have not availed the benefit of such scheme sponsored by Government or any other agency in past.
2. I am physically and mentally fit for performing pilgrimage.
3. I am not suffering from any serious ailments, communicable diseases or mental diseases.
4. I shall take care of jewellery and other belongings during the tour and Government shall not be held responsible for any loss or theft of my jewellery and other belonging.

5. The contents mentioned in the application from Sr. No. 1 to 9 are correct to the best of my knowledge and belief and nothing has been concealed therein.
6. If my declaration is proved to be wrong I am liable for all Civil/Criminal action.

Date:-

Name : _____

Signature of the applicant

Documents to be submitted alongwith the application

1. Birth Certificate/proof of age.
2. A copy of Aadhar Card.
3. A copy of Election Photo Identity Card.
4. A copy of Senior Citizen Identity card issued by Directorate of Social Welfare.
5. A Certificate issued by registered Medical Officer, Directorate of Health Services, Government of Goa in prescribed format (Annexure-E) for Applicant.

Note:- The applicant shall submit self attested documents/photographs and shall produce original documents at the time of submitting the application in the Office of the Deputy Collector in respective Taluka.

ANNEXURE -'E'**Medical Certificate for Applicant**

(to be issued by registered Medical Officer, Directorate of Health Services/Goa Medical College and Hospital, Government of Goa)

This is to Certify that I have examined Shri/Smt..... age..... resident of House No. ward..... Village/town..... Constituency..... Taluka..... and declare that he/she is not suffering from any Serious ailment, Communicable diseases, Heart diseases etc.

Shri/Smt..... is fit to perform journey/pilgrimage under "Mukhyamantri Dev Darshan Yatra Yojana" within the State of Goa.

His/Her Aadhar Card No is.....

Photo to be
attested by the
registered
Medical Officer,
Directorate of
Health Services

Name of Doctor:

Reg. No.

Signature of Medical Officer

Official Rubber Stamp

Date:

Place: