#### Government of the People's Republic of Bangladesh Ministry of Planning Implementation Monitoring and Evaluation Division

Project Monitoring Form: <u>IMED 01/2003 (Revised) (Page 1 of 4)</u> (For New/Approved/Revised Approved Project)

#### A. Project Identification

							<u>Code</u>			
<b>A.1</b>	Proj	ect Title:								
<b>A.2</b>	Exec	Executing Authority:								
		(1) Ministry:								
	(2) I	(2) Division:								
	(3) A	(3) Agency/Lead Agency:								
	(4) A	(4) Agency Type: Single Multiple								
	If M	If Multiple (Other Than Leading Agency)								
		Agency name					Code			
	1)									
	2)									
	3)			য়ত প্রকল্পের ক্ষেত্রে যদি ভিন্ন ভিন্ন						
A.4 A	DP Sub			APP):						
		Metropolitan C		District		U	pazilla			
(নোট ঃ				জলা-উপজেলার কোন তালিকা দি েকা সংযুক্ত করতে হবে।)	ত হবে না, শুধু	মাত্র 'All Upazill	las' লিখলেই হবে।			
		e Major Impa f necessary)	ct/Th	rust of the Project (as	per PCP/	PP/TAPP) (P	lease tick multiple			
	Instituti	onal dev.		Enhanced production	In	come & emplo	yment generation			
	Poverty	alleviation		Export oriented	E	nvironmental p	rotection/Dev.			
	Service	oriented		Import substitution	In	frastructure de	velopment			
	Women	development		Human development	O	thers (specify)				

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### **B. Project Objective, Components and Approval Status**

						Code			
<b>B.1</b>	Project T	`itle:							
<b>B.2</b>	Project	Objective (As Per I	PCP/PP/TAPP):	<b>!</b>					
	Troject	objective (115 1 cf 1		<u> </u>					
	Compono Sl. No.	ents: (As per table l Name of all com		of TAPP/more Is the item	e detail) Unit	(Amount in <b>Quantity</b>	Lakh Taka Cost		
	51. 140.	PCP/PP/	• '	Physical (Yes/No)	Omt	Quantity	Cost		
-					Total	Project Cost			
D 1	Imploma	entation David . (D	oto will be (DD	MM VV2)					
D. 4	mpieme	entation Period : (D	ate will be DD	-IVIIVI- 1 1 <i>)</i>	Da	y Month	Year		
(1)	Original	: Date of	Commencement						
(a	is per PC	P/PP/TAPP) Da	te of Completion	1					
(2)	) Latest I	Revised (if applicable	e): Date of C	ommencemen	t				
(a	s per PP	TAPP) Date of	Completion						
<b>B.</b> 5 A	Approval	Status: (Please Tick)	)						
(1) I	PCP:		Appro	ved		Unapprov	ed		
				[If Unapprov	ed no nee	$\frac{1}{2}$ to go for 2	& 3]		
(2)	Original l	PP/TAPP:	Appro			Unapprov			
(3) 1	Latest Re	vised PP/TAPP:	Appro		pproved n	o need to go to Unapprove	_		
B. 6 l	Date of A	pproval:							
					Da	y Month	Year		
				PCP PP/TAPP					
				RPP/RTAPP					

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#### C. Project Cost and Project Aid

	·	v	<b>Code</b>	
C.1	Project Title:			
C.2	ADP Program:  Main (Investment)  Self-financed	TA Food-aided		
<b>C.3</b>	Project Cost (As Per PCP/PP/TAPP)		(Amount in Lakh Taka)	
	Head	Original	Revised	
	1. GoB (Cash Foreign Exchange)	( )	( )	
	2. RPA (RPA Through GoB + RPA Other)			
	3. DPA			
	4. Monitised Food Aid/Food Aid (Food)			
	<b>Sub -Total</b> (1+2+3+4)			
	5. Agency's/Project's/Beneficiary's Own Resources in Cash			
	6. Agency's/Project's/Beneficiary's Own Resources in Kind			
	<b>Sub -Total</b> (5+6)			
	<b>Total</b> (1+2+3+4+5+6)			

#### **C.4 Project Aid by Development Partner:**

#### (DD-MM-YYYY)

Development	Amount	Exchange Date of Date of Loan/Grant		oan/Grant	Development	
Partner's	(US\$)	Rate	Agreement	Closing		Partner's Major
Name	in Million	(As Per	and	Oddinal Basical		Conditionality (s)
		agreement)	Effectiveness			for making credit
				Original	Revised	effective

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#### **D. Project Director's Profile:**

[Note: This form will be filled-in by the Project Director. IMED will send a pre-printed format with information available in IMED MIS and send it to the PDs once a year. The PDs will reflect the changes, if any.]

					Code				
D.1	Project Title:								
<b>D.2</b>	Project Director/Head of the Project's Name:								
	D.2.1. Designation (Parent Office) and Pay Scale :								
	D.2.2. Date of Joining as PD:								
	D.2.3. Last Working Date of Previous Project Director (if any):								
	D.2.3. Previous Experience as Project Director (if any):								
	Project Code	Project Name	e	Joining Date as PD	Last Date as PD				
D.3 A	D.3 Address								
	D.3.1	Official	:						
		Fax	:	E-mail					
	D.3.2	Residential	:						
			:						
		Phone	:	E-mail					
	D.3.3 Wh	nether PD lives	in Project Location	Yes	No				
D.4 Project Director's Working Status:									
1. Nature of Employment:			Full time		Part time				
2. Em	ployed for:		Single Projec	t	Multiple Project				
Project Director/ Authorized Signature Date:				Head of the Agen Authorized Signa Date:	•				
		~ /-							

Secretary/Head of the Planning Wing / Branch Authorized Signature Date: