

## National Mission for Manuscripts Monthly Report

**Name of the Institution (MCC)** :  
**MoU Signed**  
**Name of the Coordinator** :  
**Name of the Conservator** :  
**Name of the Assistant Conservator** :  
**Name of the Technical Assistant** :  
**Details of the Additional Staff, if any** :  
**Contact No.** :  
**Mobile** :  
**Fax No** :  
**Email** :

MONTHLY ACTIVITY REPORT OF THE MCC FOR THE MONTH OF .....

Preventive Conservation				Remedial Conservation				
No. of Mss		No. of Folio		No. of Mss		No. of Folio		
Month	Paper-		Paper-		Paper-		Paper-	
	Palm Leaf-		Palm Leaf-		Palm Leaf-		Palm Leaf-	
	Others-							
Total								

Details of workshops held :  
 No. of persons trained  
 No. of Awareness Campaigns :  
 No. of Exhibitions held :  
 Other activities, if any :  
 Any problem in MCC :  
 Name, address and Contact's of MCPC :  
 Name, and address or the institution covered and the amount of conservation work :  
 Owner name and address, Title, Acc. No. :

Please attached a separate sheet, if required  
 Please attached a separate sheet, if required  
 Please attached a separate sheet, if required

**Date:**

**Signature:**