



Project Management Policy

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Based on Work Template B, 2022
Management Document
Tayyab Trust USA



Overview

NAAS Welfare Foundation Inc. is a registered 501(c)(3) nonprofit organization in USA (Tax ID: 47-5008669), DBA Tayyab Trust USA, with multiple social programs focusing on projects related to affordable healthcare, water/WASH, food security, poverty alleviation, general welfare, etc. Our mission is to empower individuals to rise out of poverty through relief and development. Equipped with 15 years of experience led by a global network of charity sector professionals, Tayyab Trust USA has uniquely crafted expertise in impact driven project management creating significant sustainable change through the use of innovative technologies, digital management tools, and community based solutions. We have partnered with various renowned national and international humanitarian organizations to assist in project development and implementation within Asia, Africa, and Americas. The organization also manages a 30-bedded hospital, Tayyab Hospital in India, with extended primary healthcare facilities nationwide. Together, we believe that our vision to beat poverty can be achieved, and we continue to strive to reach that goal through the advancement of emergency relief and human development work globally.

We take fraud and corruption practices very seriously and have internal organizational policies to prevent such dangers from occurrence. All our policies are established on the basis of zero-tolerance with strict timely action taken against those who fail to follow the policies established. Additionally, we are committed to ensure compliance with local government regulations and keep high standards for transparency and accountability. This document will explain the purpose, scope, and statement in regard to the project management policy.

Policy Purpose

This policy is created to describe the importance of project management practices, define the organizations steps and actions to address it, and designate the appropriate procedures and activities among the board and staff in response to if needed. The information mentioned in this policy frames the overall aim of the policy and any related information from this policy may also be found in other policies and procedures enforced within the organization.

Policy Scope

This policy applies to all organization members, representatives, contractors as well as extended project staff and official volunteers. The term of this policy is for three years starting January 2025 with the next review date set for January 2028. The organization may choose to revise and renew this policy prior to the next review date upon unanimous decision from the board. All policies are maintained and recorded by the organization's board and any changes in the policies must be with the authorization and approval of the board in writing.



Policy Statement

This document outlines the project management framework for any project initiated/adopted by the organization in order to achieve successful project completion. Depending upon the project nature, budget, and location, not all projects are subject to and/or limited by this framework, and other project documents and processes may also be applicable where necessary. The Project Report (RPT) document is utilized for the management of all projects and is divided into 3 stages: stage 1 – Project Proposal, which includes the Project Proposal Form (PPF) and Project Budget Sheet (PBS), stage 2 – Project Approval, which includes the Project Media Guide (PMG) and the Project Funding Agreement (PFA), and stage 3 – Project Completion, which includes the Project Beneficiary List (PBL), Project Receipt Sheet (PRS), and Project Completion Report (PCR).

The first step during the project proposal stage is to complete the PPF (attached in annex I). This form helps gather all project narrative details to design and develop the project as per the need assessment and surveys conducted. Additionally, volunteers may be assigned for project delivery, and the volunteer sign up form is used for registration purposes (annex II). Along with the PPF, the PBS is drafted to include all the budget items related to the project. The PBS is attached here in annex III. Budgeting is divided into direct costs, indirect costs, management costs, and misc. costs. Both PPF and PBS together provide information for the project proposal, which is then reviewed by the board before proceeding with the project approval.


The PMG shows the visual media needs of the project including sample photos and videos to cover all project activities possible. To formalize the project, the PFA is signed by the funding partner and the field partner, making the project live for delivery. For some projects, monitoring and evaluation is done to check for the project's overall effectiveness and efficiency. To collect data, forms are filled such as the on-site distribution monitoring (ODM) attached in annex IV and post-distribution monitoring (PDM) attached in annex V. Each project also requires a risk management framework to be added to the project prior to implementation, which is attached in annex VI.

After the project is completed, all narrative, visual, and financial reporting is shared online through cloud platforms such as Google Drive with the completion of the PBL, PRS, and PCR. The PBL includes all beneficiary data collected such as their full name, age, address, etc. The PRS calculates the actual expenditure of the project with respect to the proposed budget in the PBS set during the proposal stage. The PCR provides closing information about the project and documents any changes from the PPF originally. Case studies may also be submitted depending upon the project (annex VII). In total, these documents added to the RPT complete the full project management.

Tayyab Trust USA is registered with the Internal Revenue Service (IRS). Public reports for the organization may also be found on their website.

Annexure I – Project Proposal Form

Project Proposal Form (PPF)

 Project Proposal Form (PPF)		PRJYEAR_PROJECT_PARTNER
S. No.	Activity	Description
1	Submitted By:	Date: Full Name: Position: Organization:
2	Project Name:	what is the name of the project? Max. 10 words.
3	Project Type:	select one project type from below: > Emergency Relief (EMG): flood/tsunami, hurricane/storm, earthquake/fire, winter > Ramadan (RMD): ramadan food kit, Iftar meal, Eid gift > Qurban (QRB): animal purchasing > Hunger (HUN): food kit, cooked meal > Health (HTH): medical camp, medical surgery, medical kit > Water/WASH (WTR): hand pump, deep well, water station, wudhu area, hygiene kit > Education/Skills (EDU): education sponsorship, skill development, school kit > Construction (CON): new housing, house repairs > Welfare (WLF): orphan support, widow support, tricycle/wheelchairs, income generation, sports/recreation, other
4	Project Deliverables:	what items will this project provide? Please add quantity and item details.



5	Project Need Analysis:	explain the project background and current need: • who: • what: • where: • when: • why:	
6	Project Implementation Strategy:	how will you execute the project and ensure its goals are met? include the project objectives and please explain the step-by-step process of all the project activities with a brief timeline.	
7	Project Outcomes & Impact:	what type of outcomes will this project create and what is the impact of the project?	
8	Project Manager:	what is the name of person managing all project activities? please share phone number and email.	
9	Project Location:	where will the project be done? Please add full address including city, state, and country. please share exact Google Maps location.	
10	Target Beneficiaries:	what demographic group does this project intend to help; does it involve any vulnerable groups such as widows, disabled, etc.?	
11	Number of Beneficiaries:	how many number of beneficiaries?	
12	Project Duration:	how many days will the project run for?	
13	Project Start Date:		
14	Project End Date:		
15	Final Report Due Date:		
16	Bank Account Details:	Bank Name:	
		Bank Address:	
		Account Name:	



		Account Number:	
		SWIFT Code / Other Details:	
		SWIFT Code / Other Details:	
17	Sample Photos:	insert any sample photos from past projects.	
18	Additional Comments:	write any further comments to share.	

Annexure II – Volunteer Sign Up Form

Volunteer Sign Up Form

Date Submitted:

Submitted By:

Name of Volunteer:	
Contact Information:	
Date of Birth:	
Have you had any experience with volunteering before?	Administrative / Management / Accounting / Event Management / Fundraising / Project Implementation / Other / None
Will you be volunteering through an institution (school/work/other)?	Yes / No If yes, what is the name of the institution _____
What is the reason for volunteering?	
How did you hear about us?	
What is your availability to volunteer per week?	
Signature:	
Reviewed By:	
Approved By:	



Annexure III – Project Budget Sheet

Project Budget Sheet (PBS)

Project Budget Sheet : <i>"Name of Project"</i>					
Item	Item Detailed Description	Unit Cost (Currency)	Total Quantity	Total Cost (Currency)	Cost Type
				-	
				-	
				-	
				-	
Project Total:				-	

Cost Description	Percentage %	Total Cost
Direct Costs	#DIV/0!	-
Indirect Costs	#DIV/0!	-
MGMT Costs	#DIV/0!	-
Misc. Costs	#DIV/0!	-
Total Project Costs		-

Reference: Cost Type	
Direct	any item that directly reaches the beneficiary
Indirect	any item that indirectly reaches the beneficiary
MGMT	cost for project management if any
Misc.	all other costs incurred in project





Annexure IV – ODM

On-site Distribution Monitoring (ODM)

Date Submitted: Submitted By:

Project Name:		
Project ID:	PRJ _____	
Specific Location: (GPS Coordinates)		
Beneficiary Details:	First Name <input type="text"/> Last Name <input type="text"/> Age <input type="text"/> Gender <input type="text"/> ID Recorded? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Project Deliverables:	Type of items <input type="text"/>	Number of items <input type="text"/>
Project Experience:	Is the distribution effective (items given as planned)? <input type="checkbox"/> Yes <input type="checkbox"/> No Is the distribution efficient (items given on time)? <input type="checkbox"/> Yes <input type="checkbox"/> No Is the beneficiary comfortable during the distribution? <input type="checkbox"/> Yes <input type="checkbox"/> No Is the beneficiary made aware of the funder organization? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the beneficiary know how to contact us? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>Notes:</u>	
Complaints:	Does the beneficiary have any complaint? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>Notes:</u>	
Field Notes:		



Annexure V – PDM

Post Distribution Monitoring (PDM)

Date Submitted: Submitted By:

Project Name:		
Project ID: Form No.:	PRJ _____ Form No. _____	
Specific Location:		
Beneficiary Details:	First Name <input type="text"/> Last Name <input type="text"/> Age <input type="text"/> Gender <input type="text"/> ID Recorded? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Project Deliverables:	Type of items <input type="text"/>	Number of items <input type="text"/>
Project Experience:	Did you collect the items yourself? <input type="checkbox"/> Yes <input type="checkbox"/> No Did you receive all the items you were supposed to? <input type="checkbox"/> Yes <input type="checkbox"/> No Did you have to pay for any items you received? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you satisfied with all the items you received? <input type="checkbox"/> Yes <input type="checkbox"/> No Did you sell any items you received? <input type="checkbox"/> Yes <input type="checkbox"/> No Were you happy with the distribution process? <input type="checkbox"/> Yes <input type="checkbox"/> No Were the distribution staff well behaved? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>Notes:</u>	
Complaints:	Does the beneficiary have any complaint? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>Notes:</u>	
Field Notes:		



Annexure VI – Risk Management Framework

Risk Assessment Framework. Ver. 2.0.



Severity →

Likelihood	1	2	3	4	5
1	Low	Low	Low	Medium	High
2	Low	Low	Medium	Medium	High
3	Low	Medium	Medium	High	High
4	Medium	Medium	High	High	High
5	Medium	High	High	High	High

Date: DD/MM/YYYY	Name of Project: “Project Name”			
Risk Details	Likelihood	Severity	Level of Risk	Action taken to mitigate risk?
Funds are not available on time by Funding Partner.	1	1	Low	Have timely communication with Funding Partner for fund disbursement.
The project deliverables cannot be provided to the beneficiaries.	1	1	Low	Prepare project timeline and work schedule for all project activities.
Distribution cannot be done at the time scheduled	1	1	Low	Beneficiaries are provided tokens for entry to distribution location, and implementation is done effectively.



There is a threat and danger to personal safety of staff and volunteers during distribution.	1	1	Low	Distribution locations are visited prior to the implementation of the program.
Extreme weather disturbance.	1	1	Low	Proper shelter arrangements are made in case of bad weather.
Transportation of items is delayed.	1	1	Low	Transportation is coordinated and constantly monitored by team daily. Guarantees are established to mitigate the risk if any.
Volunteers cannot handle the distribution management.	1	1	Low	Proper volunteer training is done ahead of time for each project activity.
Items provided are not of good quality and/or as per details.	1	1	Low	All food items are verified with samples and prechecked by team before distribution. Guarantees are established.
Beneficiaries complain and start disturbing the distribution.	1	1	Low	Crowd management is practiced, and a distribution process is established. Any complaints from beneficiaries are filed and reported for response.
Project Risk Value: <i>Low/Medium/High</i>	Additional Comments:			
Completed By:				



Annexure VII – Case Study Template

Case Study Template

Project Description	
Project Name:	
Submitted By:	
Date:	
Location:	

Beneficiary Information	
Beneficiary Name:	
Beneficiary Age:	
Beneficiary Gender:	
Household Size:	
Photo of the beneficiary:	

What was the problem?	
What was the issue the beneficiary was facing before the aid was given to them?	



How was the problem solved?	
Describe what aid was provided and how it helped the beneficiary. What was the impact created?	

Other General Feedback	
Did you learn any new lessons? Would you change anything for project distribution?	
What comments did the beneficiary have? (Share testimonial)	