



MISSION SHAKTI- DHEW

Mission shakti

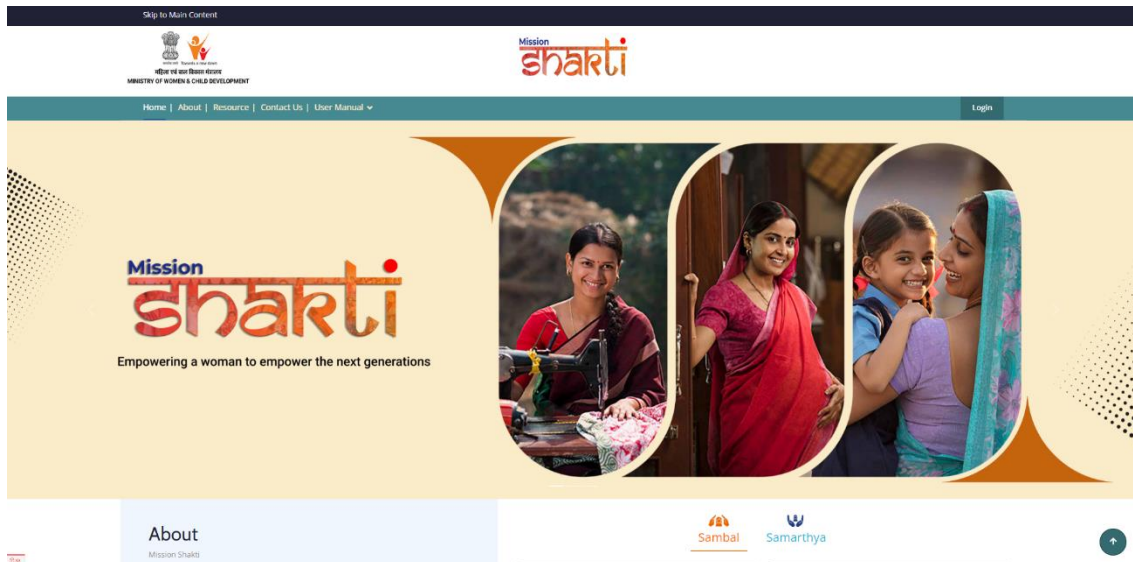
**National Informatics Centre
Ministry of Electronics &
Information Technology
Government of India**

DHEW- User Manual
User Manual

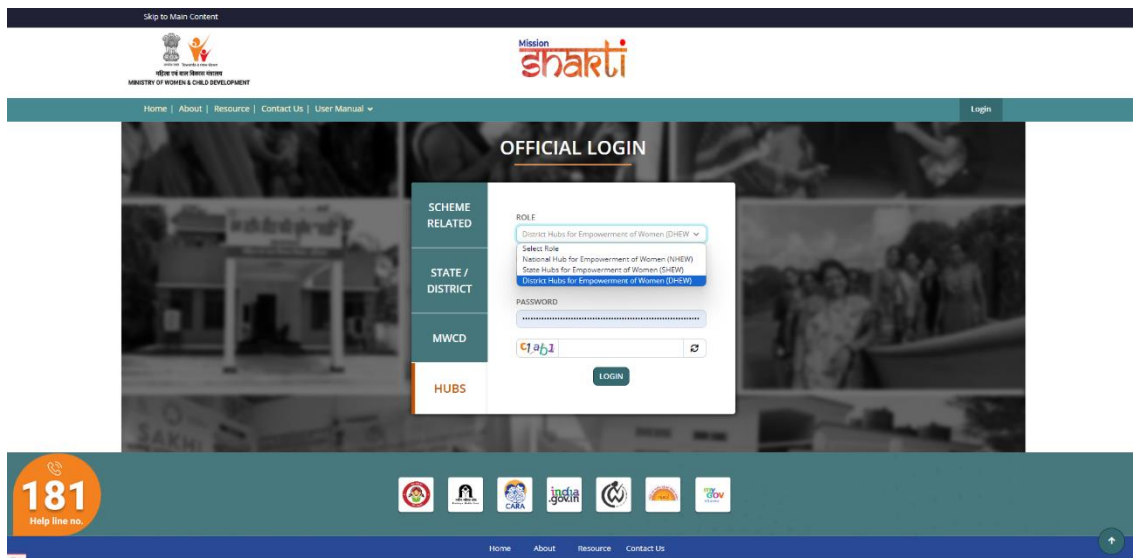
1. Login

To access the Mission Shakti Portal, follow these steps:

1. Open your web browser.
2. Type in the URL: <http://www.missionshakti.wcd.gov.in/>.
3. You will be directed to the homepage of the Mission Shakti Portal



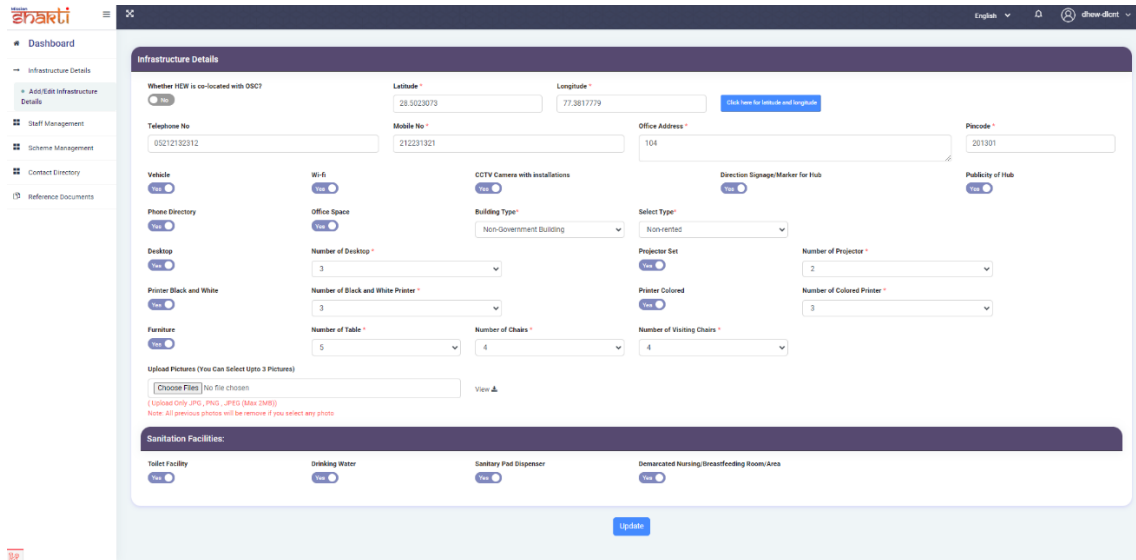
- To select the District Hub for Empowerment of Women (DHEW) from the available options, follow these steps:
- Navigate to the "HEWs" section on the Mission Shakti Portal.
- Locate and click on the "DHEW" option from the list.
- To proceed with logging in, please follow these steps:
 - (i) Enter your ID, password, and captcha in the respective fields.
 - (ii) Click on the "Login" button to access your account.



2. Fill in the Infrastructure Details

To access the infrastructure details, follow these instructions:

- Navigate to the "Infrastructure Details" section.
- Click on the "Add/Edit Infrastructure Details" option.

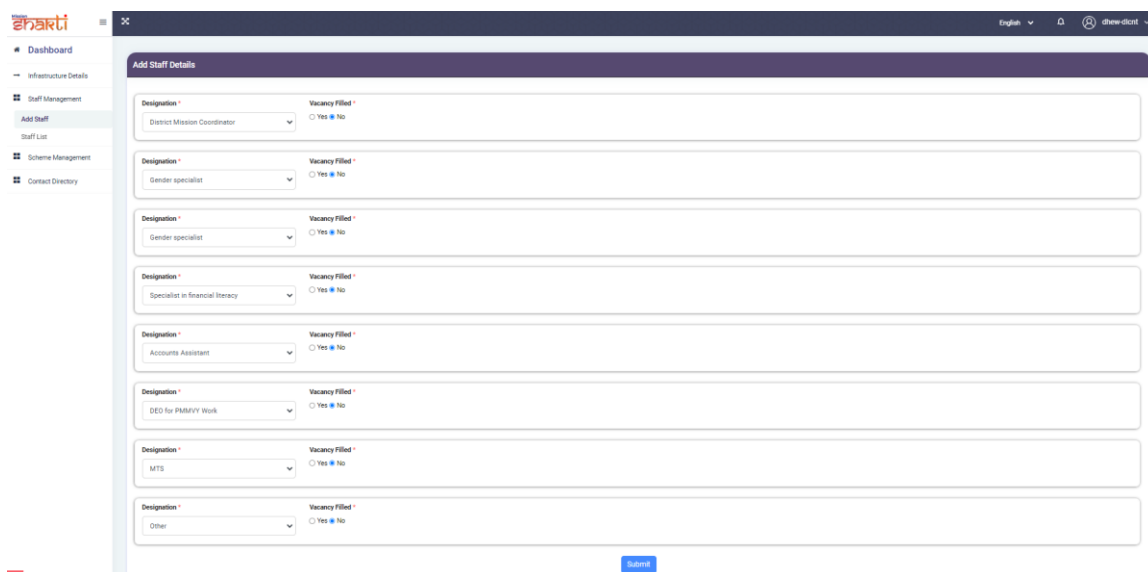


- Make sure you fill all the '*' marked fields as they are mandatory
- Click on Submit after filling all the information

3. Fill in the Staff Management

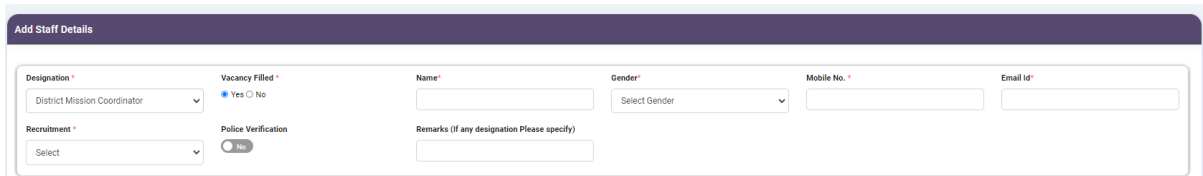
To add staff information, follow these steps:

1. Navigate to the "Staff Management" section.
2. Click on the "Add Staff" option.



Make sure you fill all the '*' marked fields as they are mandatory

Once you click on 'Yes' in vacancy filed following form will open. Update all fields and click on submit.



The 'Add Staff Details' form includes the following fields:

- Designation: Dropdown menu (selected: District Mission Coordinator)
- Vacancy Filled: Radio buttons (Yes selected, No unselected)
- Name: Text input field
- Gender: Dropdown menu (selected: Select Gender)
- Mobile No.: Text input field
- Email id: Text input field
- Recruitment: Dropdown menu (selected: Select)
- Police Verification: Radio buttons (No selected, Yes unselected)
- Remarks (If any designation Please specify): Text input field

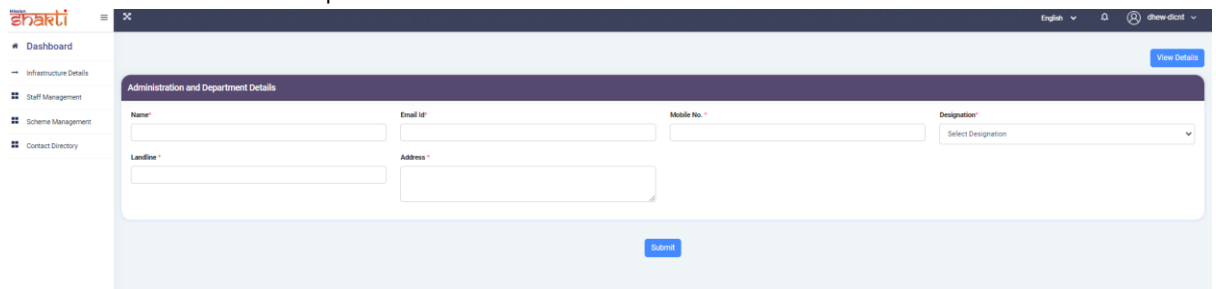
4. Contact Directory

In Contact Directory there are multiple tabs where in information has to be seeded.

Kindly upload all the related information of all the designations given under each tab.

Following are the fields:

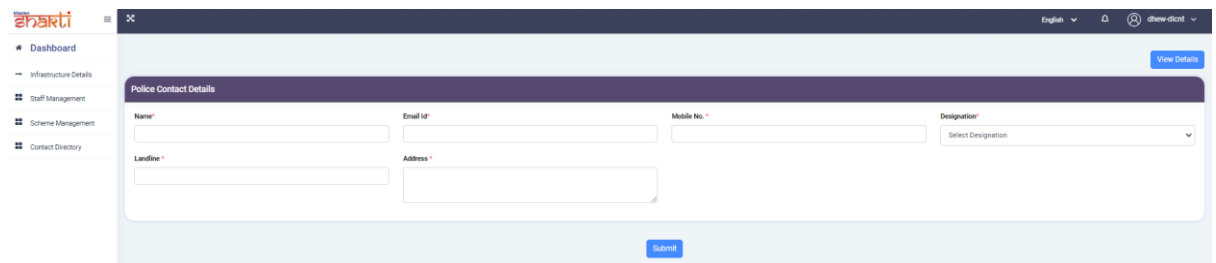
(a) Administration and Department Details



The 'Administration and Department Details' form includes the following fields:

- Name: Text input field
- Email id: Text input field
- Mobile No.: Text input field
- Designation: Dropdown menu (selected: Select Designation)
- Landline: Text input field
- Address: Text input field

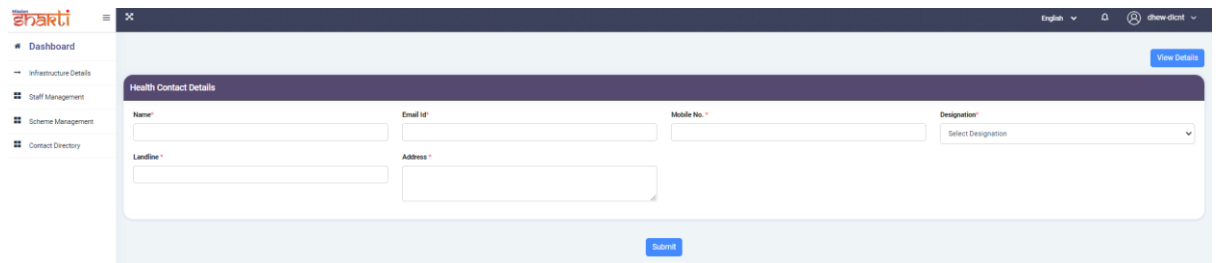
(b) Police Contact Details



The 'Police Contact Details' form includes the following fields:

- Name: Text input field
- Email id: Text input field
- Mobile No.: Text input field
- Designation: Dropdown menu (selected: Select Designation)
- Landline: Text input field
- Address: Text input field

(c) Health Contact Details



The 'Health Contact Details' form includes the following fields:

- Name: Text input field
- Email id: Text input field
- Mobile No.: Text input field
- Designation: Dropdown menu (selected: Select Designation)
- Landline: Text input field
- Address: Text input field

(d) Institute Contact Details

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Dashboard View Details

Institute Contact Details

Name* Email Id* Mobile No.* Designation*

Landline* Address*

Submit

(e) Other organisations

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Dashboard View Details

Contact Details

Name* Email Id* Mobile No.* Designation*

Landline* Address*

Submit

(f) Helpline Contact Details

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Dashboard View Details

Helpline Contact Details

Name* Email Id* Mobile No.* Designation*

Landline* Address*

Submit

(g) Information/ Inquiry Assistance Numbers

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Dashboard View Details

Helpline Contact Details

Name* Email Id* Mobile No.* Designation*

Landline* Address*

Submit

(h) District Level Committee Members Contact Information

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Dashboard View Details

District Level Committee Members Contact Information

Committee Name* Select Committee	Officer Name*	Email Id*	Mobile No. *
Designation*	Landline *	Address *	

submit