

APPLICATION FOR ORGANIZATION MEMBERSHIP



New World Hope Organization

CB-94, Land Mohabbat Abad, Barrier No.2
Wah Cantt, Pakistan, 47040
Phone: +(92) 514 329105 / Fax: +(92) 514 543317
www.newworldhope.org
E-mail: info@newworldhope.org

COMPONENTS OF A COMPLETED APPLICATION:

A.-	Statutes, constitution, charter or similar document;
B.-	Statement of organizational aims and objectives;
C.-	Proof of non-governmental and non-profit legal status;
D.-	Most recent annual report and financial statement including sources of income and current donors (audited if available);
E.-	Composition of executive body or equivalent (names and institutional affiliations);
F.-	Minutes of the last General Assembly or similar meetings;
G.-	List of member organizations (if applicable);
H.-	List of contact persons with their titles, e-mail addresses, and phone numbers;
I.-	Cheque or bank draft or international money order of membership fee in US Dollars.
Note: The application must be completed in English, as this is the working language of the New World Hope secretariat. All required documents submitted excluding publications should also be translated in English.	

***Required field**

*Organization Name:		
English Translation:		
*Acronym / Abbreviation:		
*Headquarters=Mailing Address		
*City/Town:		
*State/Province:		
*Postal Code:		
*Country:		
*Telephone:	(Country + Area code	Number)
Fax:	(Country + Area code	Number)
*E-Mail:		
Website:		
*Director of the Organization:		
*Name of main contact:		
*E-Mail of main contact:		
*Aims And Activities:		
*Annual Budget:		
*Organization Type:		
<input type="checkbox"/> Central Government Agency	<input type="checkbox"/> Network	<input type="checkbox"/> Community Organization
<input type="checkbox"/> Consulting Firm	<input type="checkbox"/> Foundation	<input type="checkbox"/> Department of Education/Local School Board
<input type="checkbox"/> International NGO	<input type="checkbox"/> Regional/Local NGO	<input type="checkbox"/> Financial Institution (e.g. Development Bank)
<input type="checkbox"/> Private Enterprise	<input type="checkbox"/> Ministry	<input type="checkbox"/> Research Institution/Think Tank
<input type="checkbox"/> University/Training Institution	<input type="checkbox"/> Self-employed	<input type="checkbox"/> State, Province, or Municipal Level Government
<input type="checkbox"/> U.N or U.N Specialized Agency	<input type="checkbox"/> Other	
*Countries in which your organization works:		
*What services or expertise do you seek?		
<input type="checkbox"/> Urban development	<input type="checkbox"/> Rural development	<input type="checkbox"/> Appropriate technology
<input type="checkbox"/> Networking	<input type="checkbox"/> Environmental protection	<input type="checkbox"/> Basic Services/utilities Infrastructure
<input type="checkbox"/> Built environment	<input type="checkbox"/> Community organization	<input type="checkbox"/> Cooperatives
<input type="checkbox"/> Cultural development	<input type="checkbox"/> Emergency responses	<input type="checkbox"/> Equipment
<input type="checkbox"/> Housing construction	<input type="checkbox"/> Social mobilization	<input type="checkbox"/> Monitoring & evaluation
<input type="checkbox"/> Social assistance Social work	<input type="checkbox"/> Alternative finance	<input type="checkbox"/> Quantitative methods Statistical analysis
<input type="checkbox"/> Transportation & roads	<input type="checkbox"/> Law & legal advocacy	<input type="checkbox"/> Budget analysis
<input type="checkbox"/> Strategic planning	<input type="checkbox"/> Project management	<input type="checkbox"/> Media & promotion
<input type="checkbox"/> Education & training	<input type="checkbox"/> Planning	<input type="checkbox"/> Research
<input type="checkbox"/> Capacity building	<input type="checkbox"/> Financing funding projects	<input type="checkbox"/> Influencing public opinion/lobbying
<input type="checkbox"/> Political/social organizing	<input type="checkbox"/> Exchange programs	<input type="checkbox"/> Housing upgrading
<input type="checkbox"/> Refugees/IDPs resettlement	<input type="checkbox"/> Architecture & design	<input type="checkbox"/> Water & sanitation
<input type="checkbox"/> International forums	<input type="checkbox"/> Other	

*What services & specialization do you provide?		
<input type="checkbox"/> Urban development	<input type="checkbox"/> Rural development	<input type="checkbox"/> Appropriate technology
<input type="checkbox"/> Networking	<input type="checkbox"/> Environmental protection	<input type="checkbox"/> Basic Services/utilities Infrastructure
<input type="checkbox"/> Built environment	<input type="checkbox"/> Community organization	<input type="checkbox"/> Cooperatives

<input type="checkbox"/> Cultural development	<input type="checkbox"/> Emergency responses	<input type="checkbox"/> Equipment
<input type="checkbox"/> Housing construction	<input type="checkbox"/> Social mobilization	<input type="checkbox"/> Monitoring & evaluation
<input type="checkbox"/> Social assistance Social work	<input type="checkbox"/> Alternative finance	<input type="checkbox"/> Quantitative methods Statistical analysis
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<input type="checkbox"/> Education & training	<input type="checkbox"/> Planning	<input type="checkbox"/> Research
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<input type="checkbox"/> Political/social organizing	<input type="checkbox"/> Exchange programs	<input type="checkbox"/> Housing upgrading
<input type="checkbox"/> Refugees/IDPs resettlement	<input type="checkbox"/> Architecture & design	<input type="checkbox"/> Water & sanitation
<input type="checkbox"/> International forums	<input type="checkbox"/> Other	

***How many people or organizations are members of your organization?**

Individual: _____

Organizations: _____

***Are you affiliated with other Organizations?** YES NO

RELATIONS WITH OTHER ACTORS:

Please list in order of importance the principal organizations with which you work on a regular basis.

NAME OF ORGANIZATION	WEB SITE

***Types of programmers & services of Organization.**

<input type="checkbox"/> Ageing	<input type="checkbox"/> Disarmament	<input type="checkbox"/> Development
<input type="checkbox"/> Food problems	<input type="checkbox"/> Human/Civil rights	<input type="checkbox"/> Labour/Union rights
<input type="checkbox"/> Literacy/Education	<input type="checkbox"/> Population	<input type="checkbox"/> Sust. Dev./Environment
<input type="checkbox"/> Women	<input type="checkbox"/> AIDS	<input type="checkbox"/> Law/Criminal justice
<input type="checkbox"/> Discrimination/Prejudice	<input type="checkbox"/> Narcotics/Drug abuse	<input type="checkbox"/> Health care
<input type="checkbox"/> Humanitarian relief/Refugees	<input type="checkbox"/> Disabled	<input type="checkbox"/> Children/Youth
<input type="checkbox"/> Economic/Social development	<input type="checkbox"/> Peacekeeping/Peacemaking	<input type="checkbox"/> Housing/Shelter
<input type="checkbox"/> Indigenous people	<input type="checkbox"/> Others	

***Operational level:**

Community-based National Regional International

***Organization Mandate:** _____

***Are you a registered non-profit?** YES NO

If so, what is your Registration Number and Date of Establishment? _____

***Your reasons and expectations for joining NWHO and possible contributions to its activities:** _____

***About staff and volunteers:**

How many paid full time staff? *	_____	How many paid part time staff? *	_____
How many full time volunteers? *	_____	How many part time volunteers? *	_____

ORGANIZATION MEMBERSHIP DUES
(Payment must be received within 30 days for this application to be valid).

Total Annual Organization Membership Due:	
Annual dues are based on the organization's annual operating budget in US dollars:	
Budgets less than \$ 250,000/year	US\$ 250/year
Budgets \$ 250,000 to \$ 500,000/year	US\$ 300/year
Budgets over \$ 500,000/year	US\$ 350/year

***Additional contribution:** Amount: _____
In addition to may membership dues, I would like to make an additional contribution (contribution are tax deductible to the extent provided by law)

PAYMENT OPTION (Please Check One)
(Please indicate that the payment is for NWHO Membership).

<input type="checkbox"/>	Cheque or Money Order or Payment by Bank Draft.	(In US Dollars as appropriate, or the equivalent in any other convertible currency), made payable to: Please Post to: New World Hope Organization CB-94, Land Mohabbat Abad, Barrier No.2 Wah Cantt, Pakistan, 47040
<input type="checkbox"/>	Pay Membership Fee Directly into the New Word Hope Account	THE NWHO BANK DETAILS ARE AS FOLLOWS.
	Title of Account.	New World Hope Society
	Account No.	CD-1735-6
	Bank Name.	The Bank of Punjab General Bus Stop, Taxila, Pakistan
	Swift Code No.	BPUNPKKAXXX

***Do you require a receipt:** Yes No

Print name and title _____ **Stamp of the organization:** _____

Organization _____

Signature of the Chairman, President or equivalent. _____ **Date: (Day, Month, Year)** _____

Please return completed form to:
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OR
E-mail to: info@newworldhope.org
Or submit on line via: www.newworldhope.org