

# ACT Alliance Application form for Voting Member status

## Application form for Voting Member statu

A. Contact information	
Name of Church/Organization:	
Year of incorporation:	
Incorporated under which legal entity:	
Incorporated under which jurisdiction (country):	
Full street address:	
City:	
Country:	
Full postal address:	
Telephone:	
Email address:	
Website address:	
Name of Primary Contact:	
Job title:	
Mobile/telephone:	
Email:	
Skype:	





Name of Director/CEO:	
Job title:	
Mobile/telephone:	
Email:	
Skype:	
Finance Contact:	
Job title:	
Mobile/telephone:	
Email:	
Skype:	

### Please also provide separately:

- 1. A logo of the organization.
- 2. A brief description of the organization and its work.
- 3. A link to your website.



## C. Applying as:

## Choose ONLY ONE of the criterion listed below by clicking on it

(Please ONLY fill the fields associated with the criterion selected. If you have entered by mistake some information in another field not related to the criterion selected, please clear it before submitting the form).

lefton	A member church of the WCC or LWF. <i>Click which:</i> 0
$\bigcirc$	A department or specialised development ministry of a member church of the WCC or LWF.  Click which:  Name of WCC or LWF church:
$\bigcirc$	An organization affiliated with at least one member church of the WCC through governance.
	Name of the WCC member church:
	Name of the Board member:
	Email of the Board member:
	Provide proof of affiliation between WCC member and your Board by attaching the relevant Statutes/Constitution, etc., where it is stated that the seat on your Board is a permanent seat reserved to this WCC member and indicate page where this is stated:
0	An international or national mission organization belonging to a member church or churches of the WCC and/or LWF who is engaged in development, advocacy and/or humanitarian assistance and who does not use these programmes to further a particular religious or political partisan standpoint. State whether you belong to WCC or LWF:  Name of WCC or LWF church:  (mandatory if criterion ticked)
$\bigcirc$	An organization which was previously part of an ACT member organization but has become independent. <b>Name of ACT member organization:</b>
	(If above criterion is ticked, attach with this application form an endorsement letter of the ACT member organization.)
	A church or an ecumenical organization that has had a long historical programmatic working relationship with the WCC and/or a regional ecumenical organization, referring to the All Africa Conference of Churches, the Christian Conference of Asia, Consejo Latinoamericano de Iglesias (CLAI), the Conference of European Churches, the Conference of Caribbean Churches, the Middle East Council of Churches, the Pacific Conference of Churches.  State whether you are a church or an ecumenical organization or a regional ecumenical organization:
$\bigcirc$	An ecumenical organization from a country where there are no member churches of either the WCC or LWF. <b>State country:</b>



### D. Description of church, church-related organization, specialised ministry

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1.	Vicion	/N/liccion
т.	VISIOII	/Mission

(NB: if a Church, please also state the mission of the department or specialised development ministry of your Church)

### 2. Areas of work<sup>1</sup>

#### a. Humanitarian

Please name any emergency/conflict situations that you have responded to in the past 3 years and describe your organization's response. Completing this section is essential if your organization wishes to apply for ACT Humanitarian funds.

#### b. Development

Please describe the type of work being undertaken or supported. If your work is focused in one country, please include the number of development programmes you are undertaking. If you either work in, or support development programmes in a number of countries, please list the countries you are engaged in and the approximate number of partners or programmes you support in each country.

### c. Advocacy

Please describe any advocacy work that your organization has been engaged in during the past two years.

<sup>&</sup>lt;sup>1</sup> You can also attach these explanations separately if you run out of space.



# 3. Staffing Total number of staff employed: Total number of volunteers: State the number of staff directly (not volunteers) employed by your church/organization in the following areas:

a)	Development:
b)	Humanitarian assistance:
c)	Advocacy:
d)	Number of senior staff positions held by women in your church/organization:
e)	Job titles (no names required) of senior staff positions held by women:
f)	Number of governing board (or relevant leadership authority) positions held by women:
4. (	Governance Structure
a)	Please describe or provide separately a diagram of your governance structure (can be attached separately)
b)	Please list the names of the members on your governing body:



### 5. Finances

### To be completed by Churches

Total income of the department/ministry within your Church that deals with development, humanitarian assistance and advocacy work and related income for staffing/ administration, etc., for the past two years (state currency):

### To be completed by Church-related organizations

Total income of your organization (this includes all sources of income, constituency, back-donor funding, investment income, etc.) for the past two years (state currency):

## E. Membership of and affiliations to humanitarian, development and advocacy organizations or networks

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1.		ecumenical collaborative initiatives (e.g., WCC roundtables, Regional Ecumenical Organizations, .) your organization is a member of:
2.	List a.	other non-ecumenical alliances or networks your organization is part of:  National:
	-	
	b.	Regional:
	c.	Global:



## F. Membership of ACT Alliance

1.	1. How did you hear about ACT Alliance/who recommended applying for ACT membership?	
	If you have clicked ACT member, forum or staff, please state:	
	Person's name:	Email:
	Organization:	
	Briefly explain your organization's reasons for wanting to beco Alliance:	me a member or observer of ACT
(No	Briefly explain what your organization can offer and contribute to ote: this is not about financial contributions, but rather relates to the particular ranization brings for the benefit of ACT Alliance.)	
4.	Briefly explain how your organization expects to benefit from bei	ng part of ACT Alliance:



## **G.** References

Please provide the contact details of two <u>ACT members or ecumenical organizations</u> that can be contacted for a reference for your church/organization:

Name:
Position:
Organization:
Mobile/Direct phone number:
Email:
State how this referee knows your organization:
Name:
Position:
Organization:
Mobile/Direct phone number:
Email:
State how this referee knows your organization:



### I. Commitment to ACT Alliance

The varying roles and responsibilities of ACT members in relation to all standards noted below are outlined in the <u>ACT Quality and Accountability Framework</u> and the <u>Membership Agreement</u>.

- a) We have read, understand and are committed to adhering to the ACT vision, mission and policy commitments.
- b) We have read and understand the ACT Code of Good Practice and are committed to adhering to the common values and overarching, organizational, programmatic and relational principles and commitment outlined in the document.
- c) We have read and understand the ACT Code of Conduct for the prevention of sexual exploitation and abuse, fraud and corruption and abuse of power and are committed to ensure that all governance, management and staff of our church/organization sign this code and understand the obligations placed upon their conduct, so as to prevent sexual exploitation and abuse, all forms of harassment, fraud and corruption, security breaches, and unethical business practices.
- d) We have read, understand and are committed to adhering to the following international standards that have been formally adopted, endorsed or committed to by ACT governance, namely:
  - The Code of Conduct for International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief
  - The Sphere Standards Humanitarian Charter and Minimum Standards in Disaster Response
  - Principles of Partnership
  - Core Humanitarian Standard (CHS)
  - Code of Good Practice for NGOs responding to HIV/AIDS
  - Istanbul Principles for Development Effectiveness

### H. Declaration

- a) After consideration of the ACT membership application process and being in agreement with the obligations and commitments incurred by membership, we hereby apply for membership of ACT Alliance on behalf of the organization whose particulars and description appears in this application form.
- b) We have read and understand the Member Funding of the ACT Alliance Secretariat Procedure and hereby commit to paying all membership dues as applicable to our organization. We further understand that failure to pay the membership fees will entail the suspension<sup>2</sup> of our organization's membership, until payment is effectuated.

<sup>&</sup>lt;sup>2</sup> Following ACT policies, once an ACT member has been suspended it cannot:

Play the role of forum convenor/coordinator in ACT forums, and its voting rights in the forum are suspended.

<sup>&</sup>gt; Access humanitarian funds channelled through ACT's Secretariat, neither RRFs nor appeals.

<sup>&</sup>gt; Participate in ACT structures, including governance, reference groups and communities of practice, and will have to step down from any groups it is participating in for the duration of the suspension.

<sup>&</sup>gt; Benefit from travel, accommodation or any other expense subsidies paid from ACT's budget.

<sup>&</sup>gt; Be nominated by the Secretariat or ACT members to represent ACT in external meetings, programmes, consultations, etc.

Nominate candidates for governance structures.

Attend ACT General Assemblies.



On behalf of church/organization:	On behalf of governance:
Name:	Name:
Position:	Position:
Date:	Date:
Signature:	Signature:

Scanned or electronic signatures, please