**APPLICATION FORM FOR NON-GOVERNMENTAL ORGANIZATIONS**

**TO JOIN THE HUMAN RIGHTS NETWORK**

**(Please read each question carefully and mark the appropriate box or fill out the blank spaces in either English or Arabic)**

**Funded by the United States Agency for International Development (USAID)**

**Through the Building Alliance for Local Advancement, Development and Investment – Capacity Building (BALADI CAP) project**

1. **Organization’s General information:**
2. Name of the Organization:
3. Year of establishment of the organization:
4. Full Address:
5. Phone number (please include country and area codes):
6. FAX (please include country and area codes)
7. Contact e-mail address:
8. Website of the NGO:
9. **Representatives’ Information:**
   1. Position of the organization’s representative:
   2. First Name:
   3. Last Name:
   4. Address:
   5. Phone Number:
   6. E-mail Address:

This application form is made possible with the support of the American People through the United States Agency for International Development (USAID). The content of this application form is the sole responsibility of SIDC and does not necessarily reflect the views of USAID or the United States Government.

1. **Areas of interest/work of the NGO:**

Youth issues

Education

Criminal Justice

Advocacy

Legal / International Law

Migration

Sustainable Development

Social Development

International Peace and Security

Human Rights

HIV/AIDS

Labour

Governance

Ageing

Research

Issues related to empowerment

Economic, social and cultural rights

Others, please specify:

1. **Target populations**

General population

Youth

Children

Refugees

Migrants

Women

People with disabilities

People living with HIV (PLHIV)

People who use/inject drugs

Men who have sex with men (MSM)

Women who have sex with women (WSW)

Transgender people

Sex workers

Prisoners or male ex-prisoners

Others, please specify:

1. **Organization’s Detailed Information:**
   1. Scope of the organization (check one)

Local

National

International

* 1. What is the number of staff in your organization:

Full time:

Part Time:

Volunteers/interns:

* 1. What is your most recent annual Budget (2019):
  2. Which of the following are the main sources of funding for your organization’s activities

Membership fees

Fundraising activities

Non-governmental donations

Voluntary contributions

Government subsidies

Others, please specify:

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the proposed NGO representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_